41ST PARLIAMENT

Report 66

BROKEN BONDS, FRACTURED LIVES: REPORT ON THE INQUIRY INTO PAST FORCED ADOPTION IN WESTERN AUSTRALIA

Standing Committee on Environment and Public Affairs

Presented by
Hon Peter Foster MLC (Chair)

August 2024

Standing Committee on Environment and Public Affairs

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ISBN 978-1-922047-69-4

Government response

This report is subject to Standing Order 191(1):

> Where a report recommends action by, or seeks a response from, the Government, the responsible Minister or Leader of the House shall provide its response to the Council within not more than 2 months or at the earliest opportunity after that time if the Council is adjourned or in recess.

The 2 month period commences on the date of tabling.

Reader caution advised

This report is about forced adoption, a subject which is confronting. The experiences relayed and information discussed in it may distress some readers. You may choose to skip sections, or to make sure you have support around you as you read through this report. After reading, you may wish to take steps to maintain your health and wellbeing, such as accessing support where required and engaging in self-care activities.

Support services

Organisation	Contact details	Type of support service
Adoption Research and Counselling Service (ARCS)	(08) 9370 4914	Adoption support service
Past adoption information and support (Department of Communities)	1800 182 178	Government service
Association Representing Mothers Separated from their Children by Adoption Inc (ARMs)	0468 444 995 support@armswa.org.au	Adoption support service
Australian Institute of Aboriginal and Torres Strait Islander Studies - Link Up Services	1800 624 332	Aboriginal support service
Beyond Blue	1300 224 636	General support service
Blue Knot Foundation	1300 657 380	Trauma support service
Crisis Care	1800 199 008	General support service
Family Helpline	1800 643 000	General support service
Forced Adoption Support Service (Relationships Australia)	1800 210 313	Adoption support service
Kimberley Stolen Generation Aboriginal Corporation	1800 830 338	Aboriginal support service
Lifeline Australia	13 11 14	Crisis support service
MensLine	1300 789 978	General support service
Yorgum Healing Services	1800 469 371	Aboriginal support service

Adoption is an experience that is widely known and poorly understood.[1]

My … much loved wanted daughter was born on my 17th birthday and made available for adoption against my will.[2]

I spent 70 days in a plastic tub, awaiting the assignment of married parents deemed appropriate by the State of Western Australia … I was stolen from my mother at birth, stripped of my identity, assigned a number, and handed to strangers who gave me a fake identity and lied to me about my origins.[3]

The secrecy involved in past adoption, the belief that children are a "clean slate" and that some mothers are somehow more worthy than others has had deep consequences.[4]

The angst may be salved for a while but it remains and a ghost kingdom of what could have been takes up the space. Without this being addressed the suffering will continue.[5]

Forced adoption practices were in essence, systemic failure.[6]

At the level of government, better practice comes from listening.[7]

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1 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

2 Judith Hendriksen, submission 6, 28 February 2023.

3 Abraham Maddison, submission 112, 23 June 2023.

4 Adoption Research and Counselling Service, submission 113, 23 June 2023.

5 Name withheld, submission 98, 16 June 2023.

6 Raymond De Jong, submission 48, 9 June 2023.

7 Josephine Wilson, submission 77, 16 June 2023.

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EXECUTIVE SUMMARY

1 This report contains the findings and recommendations of the Standing Committee on Environment and Public Affairs on the inquiry into forced adoption policies and practices in WA last century. 'Forced adoption' is an umbrella term referring to actions that separated babies and unmarried mothers against their wills for the purposes of adoption. In WA, this era intersected with policies that led to the Stolen Generations, and also involved 'Forgotten Australians' who were raised in state care, private institutions or both.

2 In 2010, the Parliament of Western Australia was the first in Australia to apologise for past forced adoption. Little action flowed from that apology, or from the recommendations that came out of the Australian Senate's inquiry into the issue in 2012.

3 The inquiry that led to this report began as a petition in the Legislative Council tabled in November 2022. It was sponsored by Jennifer McRae and contained 318 signatures. In February 2023, the Committee resolved to conduct this inquiry.

Inquiry process

4 The inquiry was advertised on social media, *The West Australian* newspaper and 24 other local newspapers across WA. Members of Parliament were invited to refer affected constituents. Posters were placed in 104 member organisations of the WA Community Resources Network. Information was published on the inquiry webpage with guidance on making submissions.

5 Submissions were received through a dedicated portal on Parliament's website, by email, and by post, and accepted in any format. The formal deadline for submissions was extended, and the Committee continued to accept new and additional submissions throughout the inquiry.

6 Committee members and staff completed trauma-informed training. The Committee accepted all requests from contributors with lived experience to keep evidence private or anonymous. Hearings were held for as many individuals who indicated a wish to appear in person as possible, and were closed to the public. On-site counselling was offered to most individual witnesses who gave evidence. Lived experience contributors were also provided with updates to keep them informed of progress on the inquiry and what to expect.

7 The Committee travelled to Albany to hear from witnesses from across the region. It also held briefings with relevant professionals, attended the 'Empty Arms, Broken Lives' memorial at Read Park in Victoria Park, and visited the Forced Adoption Support Service run by Relationships Australia WA in Belmont.

8 The Committee invited submissions and requested information from stakeholders, including government agencies and non-government organisations and institutions. The Committee was disappointed by the standard of most responses received from government agencies and non-government organisations involved in forced adoption. The Department of Communities was uncooperative and the Department of Justice's engagement in the inquiry was poor.

9 The inquiry received over 5,850 pages of evidence from 165 contributors. Three quarters of these were individuals with lived experience.

Forced adoption

10 Lived-experience evidence contained 80 clear accounts of forced adoption in WA last century. No 2 people's experiences are exactly the same, but there is a high degree of similarity between different experiences, as follows.

11 Under forced adoption practices and policies in WA last century, unmarried women were channelled into an adoption process, often early in their pregnancies, and sometimes without their knowledge. Many stayed in private institutions in the lead up to their births, where they variously worked unpaid, were psychologically abused, and were kept isolated. Pregnant women, fathers-to-be and their parents were pressured into agreeing to adoption, and women were subjected to coercive messaging that they were not fit to parent and that their children would be better off brought up by others. Some were told that if they loved their child, they would give it up. The mothers in evidence wanted to keep and raise their children.

12 Many women endured horrific treatment when they birthed, whether in confinement institutions, or in public or private hospitals. Mothers had their babies taken at birth and were prevented from accessing them prior to signing any consent to their adoption. This practice facilitated obtaining their signed consent. Adopted people were institutionalised as babies for days, weeks or months. Both Aboriginal and non-Aboriginal people experienced separation through forced adoption.

13 The processes by which consent was obtained for babies' adoptions, or dispensed with, were coercive, deceptive, flawed or unlawful. Some mothers were unfit to sign consent, not informed, and/or were threatened or otherwise coerced into signing their consent. Many mothers were misled as to where their children were at different points and thought they had been placed with prospective adoptive parents when that was not the case. Some children were placed for adoption prior to any consent being signed by their parent/s, and most prior to orders of adoption being made. Adoptive parents were not vetted, barely checked, or inadequately assessed.

14 Adopted people's original birth certificates, which rarely listed their fathers even when known, were cancelled, and replaced with ones which made them appear the biological children of their adoptive parents. Access to information or records about adoptions was heavily restricted, which prevented parents from accessing information about their children, or children about their parents, until those restrictions were progressively lifted over the course of years.

Context

15 In 1896 WA became the first jurisdiction in the Commonwealth to put a legal framework around adoption. The legal effect of an adoption order made under the *Adoption of Children Act 1896* (WA) was that the adoptive parents became the legal parents and guardians of the child, and the parents ceased to be so.

16 Numbers of adoptions were low near the start of the 20th century. To begin, adopting a child was not socially desirable, however this view shifted in the 1940s with the theory that children were a 'blank slate' that could be redeemed if they were raised in the 'right' environment. The State also saw the financial benefit in having children adopted to private homes rather than becoming wards of the State, and promoted adoption.

17 Concurrently, the introduction of safe and reliable milk formula allowed for the 'clean break' practice of separating children for adoption from their mothers at birth, as opposed to them remaining together to breastfeed for a period.

18 Demand for adoption in WA grew over the decades and peaked around 1970, when 673 children were placed for adoption. Most adoptions were of babies born to unmarried mothers placed with non-relatives.

19 However, most unmarried mothers in WA who gave birth during the inquiry period did not have their children adopted. The percentage of unmarried parents having children increased

over last century, while adoption became a less common outcome amongst unmarried mothers from the 1950s on.

20 While forced adoption is sometimes perceived as occurring because of the social conditions and beliefs at the time, this is incorrect. Unmarried women who experienced forced adoption in WA were in the minority of all those who gave birth. External forces both acted on, and failed to act to protect, unmarried mothers whose children were taken for adoption against their will.

21 Over the course of the 20th century, the Parliament of WA made successive changes to the legal framework around adoption in an effort to improve the law and respond to problems that had emerged or were at risk of occurring in the future. Problematic practices developed and continued in both the public and non-government sectors despite modifications to the law. On the whole, adoption legislation and subsequent changes to it across the 20th century contributed to a legal environment that enabled forced adoption practices to occur.

The role of the WA government

22 The Committee found the government was centrally involved in past forced adoption. The three government agencies with roles in past forced adoption were the Department of Communities (under its previous names), the Department of Health, and the Department of Justice.

23 The Department of Communities was the primary government agency involved in past forced adoption. The Department provided reports on all applicants for adoption from 1959 onwards, and from 1971 onwards its view of whether a person was 'fit and proper' to adopt became conclusive evidence of that fact. The Department also had a greater role which extended beyond what was clearly set out by the legislation. It arranged adoptions and prepared applications for orders of adoption. Officers at the Department engaged in systemic improper and unethical practices, including taking newborns from their mothers at birth and withholding access. Many of these practices served to coerce unmarried mothers to consent to the adoption of their children.

24 The Committee found the Department of Health played a role in past forced adoption. Public hospitals arranged adoptions and staff certified mothers were fit to consent to adoption. Staff at public hospitals, particularly King Edward Memorial Hospital, engaged in unethical and improper practices, including taking newborns from their mothers at birth and withholding access. Many of these practices served to coerce unmarried mothers to consent to the adoption of their children.

25 The Committee also found the Department of Justice played a role in past forced adoption. Staff employed at the courts processing adoption orders engaged in unethical and improper conduct when dealing with mothers signing consent documents. This assisted in and facilitated the coercion of unmarried mothers to consent to the adoption of their children.

The role of private institutions & health services

26 The Committee found that Ngala, Hillcrest Maternity Home/Hospital, and multiple institutions run by the Sisters of Mercy each played roles in past forced adoption. These private institutions housed unmarried mothers during and after their pregnancies, and arranged adoptions. Some also provided obstetric services, and nurses and doctors in these and other private hospitals certified mothers as fit to consent to adoption when they could reasonably be expected to know this was incorrect. Each of these institutions engaged in practices which coerced unmarried mothers to agree to the adoption of their children, including taking their newborns at birth and withholding contact.

27 The Committee recommends Ngala, the Salvation Army, and the Institute of Sisters of Mercy Australia and Papua New Guinea each commit to participating in a redress scheme in recognition of their involvement in past forced adoption in Western Australia.

28 In addition to the above institutions, the Committee also found that staff at other private hospitals, GPs, obstetricians, psychiatrists, and legal practitioners each also played roles in past forced adoption.

Ongoing impacts

29 The initial separation of infants and mothers caused immediate trauma for both parties. The impacts of forced adoption continue to be felt today, and to reverberate through families. Many mothers and adopted people report their symptoms worsen with time.

30 The treatment of children within adoptive families ranged from nurturing and loving to horrifically abusive. No matter what their experiences, adopted people carried the early trauma of their birth, removal, and institutionalisation through their childhoods. This trauma compounded any other negative experiences.

31 Adopted people who were told they were adopted as children faced identity issues, and some wanted to find their original family and get information about their backgrounds from a young age. Whether or not they knew of their adoption, many adopted people did not feel they belonged as children. The secrecy and shame around adoption affected adopted people growing up. Their experiences of abandonment and rejection negatively impacted their self-perception, their ways of being in the world and their relationships when young. The impact on relationships continues into adopted people's adult lives.

32 Mothers whose children were taken for adoption at birth were expected to carry on with their lives as if nothing had happened. They describe being silenced, continuing to carry shame and guilt, and a disenfranchised grief for their absent child. Many mothers were traumatised both by the loss of their children and the inhumane and coercive treatment they received around their pregnancies and births. As their children were being raised by others, mothers continued to seek assurance as to their welfare and to try and find them. As with adopted people, mothers' experiences of forced adoption affected and continues to impact their relationships, including their ability to connect with and parent subsequent children.

33 Both adopted people and mothers have been damaged by their experiences of forced adoption. They suffer depression, anxiety, post-traumatic stress disorder, and addiction. Some considered, attempted or committed suicide. A significant number of mothers and adopted people were abused in their intimate relationships, family contexts or beyond.

34 Amongst those impacted, some groups encounter unique challenges. Adopted people who discover their adopted status late in life experience shock, a betrayal of trust and other complex problems. Some adopted people still do not know they are adopted. Aboriginal adopted people removed from their mothers at birth additionally suffer from loss of language, cultural identity and cultural connection.

35 Fathers also experience grief, loss and trauma because of past forced adoption. Many were sidelined at the time. Some were not aware they had children and are only learning of them as adults.

Support needed

36 The Department of Communities and multiple non-government organisations provide combinations of services supporting mental health, search contact and reunion, family research, information access and general support.

37 To support their ongoing mental health needs, people affected by past forced adoption require trauma-informed and specialist services from qualified practitioners with training and experience in organised violence, family separation and adoption issues.

38 The number of WA counsellors adequately trained and skilled to truly assist forced adoption clients does not meet existing need. Those affected have trouble finding and continuing to access the help they need. Cost is a barrier, as is availability and distance for regional residents. It is vital that people are empowered to choose and change practitioners to ensure they are getting the help most appropriate for them.

39 The Committee found that access to information and records is crucial for people affected by past forced adoption. Access to records often occurs under the processes of the *Freedom of Information Act 1992* (WA), and the *Adoption Act 1994* (WA). Neither of these processes meets the needs of those affected by past forced adoption. The Committee recommends a new scheme for access to information and records relating to adoption.

40 Parties to closed adoptions seeking to identify and connect with family have options through DNA and internet-based services that did not exist when the *Adoption Act 1994* (WA) commenced. The process of searching for, contacting and reuniting with lost family is difficult, even when outcomes are relatively positive. People impacted by past forced adoption need independent and skilled specialist support in this area. This is essential even in the face of technological changes which enable many to engage directly in search and contact processes.

41 The Committee has made recommendations that aim to address the issues identified in relation to current support in all identified areas. One key recommendation is that support services should not be provided by the Department of Communities, due to its role in past forced adoption. The WA Government should consult with stakeholders to develop and implement a plan for specialised services that better meet the needs of those affected.

Redress scheme for past forced adoption

42 The Committee recommends a redress scheme be established for those directly affected by past forced adoption in WA. This should comprise a monetary payment, counselling and psychological support, and a direct personal response from involved institutions and organisations. The Committee has set out several guiding principles for such a scheme. The WA government should work with the institutions involved in past forced adoption, to secure their commitment to the redress scheme. The WA government should also establish accessible legal advice for those affected by past forced adoption.

Broader issues

43 The Committee recognises that there are currently several barriers to civil remedy for those affected by past forced adoption who wish to pursue this. The Committee recommends the removal of these barriers so that these actions can proceed and be judged on their merits.

44 The Committee acknowledges the difficulties surrounding contact vetoes under the *Adoption Act 1994* (WA). The Committee has made a number of recommendations to address the issues arising from contact vetoes. This includes informing those who were provided with information about undertakings which is now out of date, repealing sections requiring undertakings to be provided in connection with contact vetoes, converting existing contact vetoes into 'statements of objection to contact', and removing contact vetoes.

45 The Committee also recognises other obstacles being faced by those affected by forced adoption and has made recommendations to address these. This includes the ability for an estate to continue civil litigation regarding past forced adoption where a plaintiff has died, publicly available information and forms about discharge of adoptions, adjustment of various

offences under the *Adoption Act 1994* (WA), and changes to the circumstances in which people are notified that they were involved in an adoption.

Moving forward with consultation and transparency

46 The actions of WA past governments have contributed to a lack of general awareness around forced adoption as a chapter in WA's recent history. This continues to impact those with lived experience and must be addressed. Both they and the public also need clear information about present-day adoption practices and legislation. It is vital that people who lived forced adoption and their families are included in discussions around the issues that continue to affect them, as well as decision-making relevant to adoption in WA going forward.

Findings and recommendations

Chapter 4 – Pregnant women and unborn children

FINDING 1 Page 103

During the 20th century in WA, some unmarried pregnant women were funnelled towards adoption against their will – sometimes without their knowledge. Women wanted to keep and raise their babies once born. Information relevant to them was withheld, or they were misinformed. Women were pressured and coerced into agreeing to adoption. Pressure was also exerted on fathers-to-be, and the parents of both pregnant women and fathers-to-be.

Chapter 5 – New mothers and babies

FINDING 2 Page 109

In WA last century, the medical files of unmarried pregnant women were marked to indicate that their babies were to be adopted. This notation occurred when mothers wanted to keep their babies, when they had not signed any official consent to adoption, and when they had not discussed adoption with medical staff.

FINDING 3 Page 121

Newborns were removed from their mothers at birth without the mothers' consent. In many cases mothers were prevented from seeing or holding their babies at birth, and adopted people were denied being held by their mothers at birth.

FINDING 4 Page 127

Unmarried mothers and fathers and their newborns were denied access to one another.

FINDING 5 Page 131

Some mothers were given restricted access to their newborns. The separation of mothers and infants was not consistent within and across public and private hospitals and institutions.

FINDING 6 Page 133

Mothers were not told where their babies were, or were lied to about their whereabouts.

FINDING 7 Page 138

Babies taken from their unmarried mothers were institutionalised, and some were left in institutions for extended periods, including several months and up to one year.

FINDING 8 Page 144

Unmarried women experienced discrimination in both the general and medical treatment they received during labour, while giving birth, and after birth. For some, this included obstetric violence and being administered medications without their knowledge or consent, and/or without medical necessity.

FINDING 9 Page 155

Separation was experienced as trauma by both mothers and infants.

Chapter 6 – Consent, permanent separation and placement

FINDING 10 Page 167

Practices used to obtain consent to adoption from mothers were coercive.

FINDING 11 Page 174

Many mothers were made to sign consent to adoption when they were not fit to do so.

FINDING 12 Page 182

Mothers who signed consent to adoption were not adequately informed or were misinformed.

FINDING 13 Page 191

Many mothers did not know the law provided for them to revoke their consent to adoption. Those who did were not told how to do this. Those who tried to revoke their consent were dismissed. Although revocation of consent was technically available to them, in practice the procedures of the time meant they were unable to do this.

Chapter 7 – The role of the WA government

FINDING 14 Page 205

The Department now called Department of Communities was directly involved in and responsible for adoptions under the *Adoption of Children Act 1896* (WA) throughout the 20th century.

From 1959 onwards, the Department provided reports on all applicants for adoption, which meant that it was involved in every application for an adoption order within Western Australia.

From 1971 onwards, the Department's reports as to whether an applicant for adoption was a 'fit and proper person' became conclusive evidence as to that fact, which placed it in a position of significant power and responsibility.

FINDING 15 Page 209

During the 20th century the Child Welfare Department and Department for Community Welfare (now Department of Communities) arranged adoptions, placed children for adoption, obtained and arranged for consent to adoption, and completed paperwork for adoption applications which included reports on adoptive parents and affidavits.

FINDING 16 Page 220

The Child Welfare Department and Department for Community Welfare (now Department of Communities) did not routinely check the wellbeing of children placed for adoption.

FINDING 17 Page 220

Some officers of the Child Welfare Department and Department for Community Welfare (now Department of Communities) engaged in unethical, improper, and in some cases potentially unlawful conduct with impunity.

FINDING 18 Page 222

Some officers of the Child Welfare Department and Department for Community Welfare (now Department of Communities) omitted details from official Departmental records about their interactions with mothers, fathers, and their families in relation to adoption.

FINDING 19 Page 223

Unethical, improper and potentially unlawful practices within the Child Welfare Department and Department for Community Welfare (now Department of Communities) were systemic.

FINDING 20 Page 223

Officers of the Child Welfare Department and Department for Community Welfare (now Department of Communities) worked off-site in institutions and hospitals. Their conduct and attitudes informed and influenced staff employed in those settings.

FINDING 21 Page 224

Some public hospitals including King Edward Memorial Hospital arranged adoptions in the 20th century.

FINDING 22 Page 226

The Public Health Department (now Department of Health) played an active and substantial role in past forced adoption.

FINDING 23 Page 226

Staff at public hospitals brought unmarried mothers to the attention of the Child Welfare Department and the Department for Community Welfare.

FINDING 24 Page 227

Staff at public hospitals marked the records of unmarried mothers and their children with symbols. This shorthand indicated that the mother was unmarried and her child was to be adopted.

FINDING 25 Page 227

Some staff at public hospitals routinely treated unmarried mothers with less care than other patients.

FINDING 26 Page 228

Staff at public hospitals left unmarried mothers unattended when they required medical assistance.

FINDING 27 Page 228

Staff at public hospitals administered medication to unmarried mothers without their knowledge or consent, or without medical necessity. This included sedatives and opiates, antipsychotic medications, drugs to prevent lactation, and drugs to induce labour.

FINDING 28 Page 229

Unmarried mothers in WA public hospitals were used for the training of medical students without their consent and without regard for their privacy or dignity.

FINDING 29 Page 230

Staff at public hospitals removed, and facilitated the removal of, babies of unmarried mothers immediately and shortly following their birth.

FINDING 30 Page 230

Staff at public hospitals prevented unmarried mothers from seeing, touching or holding their babies when they were immediately removed following birth.

FINDING 31 Page 230

Staff at public hospitals did not permit unmarried mothers to have contact with their babies after they had been removed.

FINDING 32 Page 231

Some staff at public hospitals treated unmarried mothers well and surreptitiously assisted unmarried mothers to see and hold their babies after they had been removed.

FINDING 33 Page 231

Staff at public hospitals gave names to children of unmarried mothers that differed to the name given by the mother at birth.

FINDING 34 Page 232

Officers at King Edward Memorial Hospital relocated babies taken from unmarried mothers without their knowledge or consent and prevented their mothers from locating them.

FINDING 35 Page 232

Staff at public hospitals misled unmarried mothers concerning the location of their child.

FINDING 36 Page 233

The Supreme Court of Western Australia, and the Family Court of Western Australia, administered by the Department of Justice, played a role in past forced adoption in the 20th century.

FINDING 37 Page 235

The framework for adoptions in the 20th century resulted in judicial officers being increasingly made to rely upon documents prepared by proponents for adoption (including the Department, and private solicitors engaged by prospective adopters) when determining applications for orders of adoption.

Chapter 8 – The role of private institutions & health services

FINDING 38 Page 243

The Alexandra Home for Women, the Alexandra Home for Mothers and Babies and Mothercraft Training School, and Ngal-a Mothercraft Home and Training Centre arranged adoptions during the 20th century.

FINDING 39 Page 243

The Alexandra Home for Women, the Alexandra Home for Mothers and Babies and Mothercraft Training School, and Ngal-a Mothercraft Home and Training Centre played a significant role in past forced adoption in WA.

FINDING 40 Page 247

Unmarried mothers at the Alexandra Home for Women, the Alexandra Home for Mothers and Babies and Mothercraft Training School, and Ngal-a Mothercraft Home and Training Centre were made to work and complete labour. In some cases, labour was unpaid and was performed despite women paying for their stay.

FINDING 41 Page 249

The Alexandra Home for Women, the Alexandra Home for Mothers and Babies and Mothercraft Training School, and Ngal-a Mothercraft Home and Training Centre engaged in pressure and coercion practices which caused unmarried mothers to agree to the adoption of their children.

RECOMMENDATION 1 Page 249

Ngala commit to participating in a redress scheme in recognition of their involvement in past forced adoption.

FINDING 42 Page 251

The Hillcrest Maternity Home/Hospital operated by the Salvation Army arranged adoptions in the 20th century.

FINDING 43 Page 251

The Hillcrest Maternity Home/Hospital operated by the Salvation Army played a significant role in past forced adoption in WA.

FINDING 44 Page 255

Unmarried mothers at Hillcrest Maternity Home/Hospital were made to work and complete unpaid labour, despite paying for their stay. In some cases this labour was clearly contrary to the health needs of the mothers.

FINDING 45 Page 255

The Salvation Army financially benefited from the unpaid labour of unmarried mothers at Hillcrest Maternity Home.

FINDING 46 Page 255

Staff at Hillcrest Maternity Home/Hospital neglected the medical needs of unmarried mothers. This included failing to provide check-ups in the period prior to birth, and leaving mothers unattended and neglected for extended periods during labour.

FINDING 47 Page 256

The Salvation Army failed to adequately maintain its records for Hillcrest Maternity Home/Hospital.

FINDING 48 Page 256

Hillcrest Maternity Home/Hospital engaged in pressure and coercion practices which caused unmarried mothers to agree to the adoption of their children.

RECOMMENDATION 2 Page 256

The Salvation Army commit to participating in a redress scheme in recognition of their involvement in past forced adoption in WA.

FINDING 49 Page 258

Women at institutions operated by the Sisters of Mercy including St Margaret's Hostel, the Catherine McAuley Centre, and St Anne's Maternity Home were made to perform unpaid labour, which included caring for children who were not their own.

FINDING 50 Page 260

St Anne's Maternity Home/Hospital operated by the Sisters of Mercy (now Institute of Sisters of Mercy Australia and Papua New Guinea) arranged adoptions in the 20th century.

FINDING 51 Page 261

Institutions operated by the Sisters of Mercy (now Institute of Sisters of Mercy Australia and Papua New Guinea) engaged in pressure and coercion practices which caused unmarried mothers to agree to the adoption of their children.

RECOMMENDATION 3 Page 261

Institute of Sisters of Mercy Australia and Papua New Guinea commit to participating in a redress scheme in recognition of their involvement in past forced adoption in WA.

Chapter 9 – Ongoing impacts of separation

FINDING 52 Page 296

Forced adoption policies and practices were damaging and have an ongoing negative impact on the mental health, health and life outcomes of those who experienced them and their families.

Chapter 11 – Mental health

FINDING 53 Page 309

The Department of Communities does not adequately engage with people affected by forced adoption or facilitate their access to external support services.

RECOMMENDATION 4 Page 309

The WA Government consult with support service providers and people affected by forced adoption to:

- improve the quality and dissemination of information on available mental health supports
- devise better internal procedures for interacting with forced adoption clients, and for connecting people to relevant supports and following-up
- increase referrals to external support services.

FINDING 54 Page 314

People affected by past forced adoption need financially accessible, securely funded mental health services to address and ameliorate the impacts of forced adoption.

FINDING 55 Page 315

Mental health services for people affected by past forced adoption must be independent of the WA government department historically involved (currently the Department of Communities) and non-government institutions that played a role in forced adoption in WA.

FINDING 56 Page 321

A larger workforce of qualified counsellors trained in forced adoption-centred, therapeutic approaches to treating trauma is needed to meet the needs of Western Australians impacted by forced adoption.

RECOMMENDATION 5 Page 325

The Minister for Health and Mental Health consult with people impacted by forced adoption in WA and professional representative bodies to commission informed development of:

1) criteria for establishing a mental health practitioner as a specialist in treating trauma in the forced adoption space
2) a public register of WA professionals who meet these criteria and their contact details
3) a means for inviting relevant WA professionals to register
4) a system for assessing applications
5) a system for maintaining, updating, and advertising the register
6) a strategy to quickly grow the number of professionals eligible for the register
7) a plan for periodic review and revision of this arrangement, including through consulting with people with lived experience of forced adoption.

RECOMMENDATION 6 Page 327

The Minister for Health and Mental Health:

1) consult with relevant stakeholders to develop and implement a strategy for promoting the Australian Psychological Society's forced adoption training package for psychologists and general practitioners within WA
2) connect WA health professionals to their network counterparts working in this space.

RECOMMENDATION 7 Page 327

The Minister for Community Services tie future funding for forced adoption counselling services to:

1) qualified practitioners completing training and development relating to forced-adoption
2) the provision of evidence-based approaches to treating complex trauma
3) ongoing clinical supervision from qualified professionals specialised in trauma.

FINDING 57 Page 328

Research into the experiences of people who lived through forced adoption would improve the evidence-base for practitioners and support providers who service them.

RECOMMENDATION 8 Page 328

The Minister for Health and Mental Health commence a dialogue with those with lived experience of forced adoption, service providers and the university sector to:

1) establish a post-graduate qualification in treating forced-adoption traumas
2) establish research projects into relevant topics, such as health and mental health impacts, data collection and data linkage
3) incentivise study and research in this area through the provision of scholarships.

FINDING 58 Page 330

People impacted by forced adoption need choice and flexibility in accessing mental health care and support.

FINDING 59 Page 331

Regional residents affected by forced adoption need accessible in-person services or funding to travel to access them.

FINDING 60 Page 334

Peer groups are generally valuable for people affected by forced adoption and have potential for connecting individuals to further supports, research, and therapeutic benefit.

Chapter 12 – Records and official documents

FINDING 61 Page 336

Access to personal information and records is crucial for those affected by forced adoption.

FINDING 62 Page 337

Access to the medical history of their parents and relatives enables adopted people and their descendants to make more informed personal health decisions and to access better health care.

FINDING 63 Page 342

Some contributors were unable to provide records to the inquiry because they were unable to obtain those records.

FINDING 64 Page 342

Difficulty contributors had obtaining records adversely impacted the operation of the inquiry.

RECOMMENDATION 9 Page 344

The WA Government develop an accessible online resource that is clear, comprehensive, and up to date providing advice identifying the existing collections of records relevant to forced adoption, where they are held and how the records can be accessed.

FINDING 65 Page 346

The current application of the process for accessing records through the *Freedom of Information Act 1992* is resulting in inconsistent outcomes for those affected by forced adoption.

FINDING 66 Page 346

The current application of the process for accessing records through the *Adoption Act 1994* is resulting in inconsistent outcomes for those affected by forced adoption.

FINDING 67 Page 358

The current process for access to records and information results in inconsistent outcomes and further harm to those affected by forced adoption.

RECOMMENDATION 10 Page 359

The WA Government give urgent consideration to the introduction of legislation in the next Parliament that incorporates the following features:

1) A separate act dealing with access to information and records relating to adoption.
2) Applications to access information and records under the scheme be managed by a standalone unit responsible for managing adoption information within the Department of Justice.
3) A clear object under the Act to ensure those affected by adoption have access to information about themselves and their lives, including their early care and their medical needs.
4) Records currently held by the Department of Communities relating to forced adoptions be transferred to the unit dealing with applications under the scheme.
5) Records currently held by entities or institutions which previously provided adoption services be provided to the unit dealing with applications under the scheme.
6) Records from the Department of Communities be reviewed, catalogued, and digitised as a matter of urgency.
7) Applications under the scheme provide for access to information and records about the adoption itself, and also about the early life of an adopted person. This includes medical records.
8) Applications provide for access to medical information relevant to the health of an adopted person or their descendants.
9) Redaction only be used to the minimum extent necessary.
10) Summaries or extracts not be provided to applicants.
11) Applicants be provided with a list or index of records that exist, and information as to what has been provided, what has not, and the reasons for this.
12) There be clear and legislated pathways for internal and external review of decisions made regarding access.
13) The new scheme include a provision equivalent to section 83 of the *Adoption Act 1994* (WA). Where there is an existing court order under section 83 of the *Adoption Act 1994* (WA), that order be converted to apply to the new scheme.

RECOMMENDATION 11 Page 363

The WA Government urgently implement integrated birth certificates, to be issued to eligible people upon request, and that they be legal proof of identity of equal status to other birth certificates.

RECOMMENDATION 12 Page 369

The Attorney General liaise with the Registry of Births Deaths and Marriages to implement a specific process for the names of fathers to be added to the birth certificates of children who were subsequently adopted and for whom fathers' identities were not originally recorded.

This process should be responsive to the needs of people affected by forced adoption, including in the following ways:

- not assume fathers will be alive, located within Australia, literate, or without other impediments to providing sworn evidence in writing
- not assume applicants will have support from or any relationship with the father, or other family members
- not assume fathers will be listed on other documents relating to the adoption of the child
- any application fees be waived
- the cost for any DNA test required not be borne by the applicant.

RECOMMENDATION 13 Page 369

The WA Government implement integrated death certificates, to be issued to eligible people upon request, and that they have equal legal status to other death certificates.

Chapter 13 – Search, contact and reunion

FINDING 68 Page 377

The cost of applying for birth, death and marriage certificates and restrictions on who can access them inhibits people affected by forced adoption when searching for their family.

FINDING 69 Page 377

Access to electoral roll information for dates or years of birth would assist those affected by past forced adoption in their search for family and identity.

RECOMMENDATION 14 Page 377

The Minister for Community Services direct the Department of Communities to consult with relevant adoption search, contact and genealogy service providers to devise and action steps for improving access to records necessary to identify key family.

RECOMMENDATION 15 Page 379

The WA Government introduce an amendment bill repealing provisions relating to contact and mediation licenses in the *Adoption Act 1994* (WA).

RECOMMENDATION 16 Page 383

The Minister for Community Services direct the Department of Communities to review their internal practice on search and contact to ensure that people affected by past forced adoption receive clear and simple information, orally as well as in writing, about all relevant matters, including:

- what supports exist and why using them may be beneficial
- what support services are provided by the relevant authority
- the roles of public servants who provide which support services and the qualifications relevant to those roles
- who is eligible and ineligible for support services provided by the relevant authority and on what bases
- what support services are provided externally
- how to access those external services
- whether those external services are free or charge fees.

Chapter 14 – Adequacy of support services

RECOMMENDATION 17 Page 395

The WA Government consult with lived experience stakeholders and identified support service providers to develop and implement a plan for services to meet the needs of people impacted by forced adoption in WA in relation to:

- mental health support
- access to adoption records and information
- search, contact, genealogy and mediation services.

RECOMMENDATION 18 Page 395

The WA Government make arrangements to ensure that the services of:

- access to adoption records and information, and
- search, contact, genealogy and mediation services

are provided by a standalone unit that is not within the Department of Communities.

Chapter 15 – Accountability and action

RECOMMENDATION 19 Page 397

The WA Government consult with lived experience stakeholders to develop and implement a strategy for raising public awareness of forced adoption, including staff training, the gathering of health-related information, online information, and the development of any other relevant resources.

RECOMMENDATION 20 Page 411

The WA Government establish a redress scheme for those directly affected by past forced adoption in WA, comprised of:

- a monetary payment
- counselling and psychological support
- a direct personal apology from involved institutions and organisations.

The following principles guide the scheme:

- the eligibility criteria include mothers whose babies were forcibly removed, children forcibly removed from their mothers, and in some circumstances fathers of children forcibly removed
- the evidentiary threshold be 'reasonable likelihood' that the child was forcibly separated from its mother or parents
- the process streamlined and applicants given choice between the scheme's components
- fixed sum payments through the scheme that does not discriminate between the specific circumstances of different applicants or the eligibility classes
- lifelong individual and family counselling by therapist of choice
- applicants not precluded from accessing the scheme if they have made a civil claim
- the scheme be administered by a standalone unit not within the Department of Communities.

RECOMMENDATION 21 Page 411

The Attorney General liaise with those institutions and organisations involved in past forced adoption, and secure their commitment to a redress scheme including:

- partial reimbursement for redress payments and/or counselling provided to recipients
- participation in an apology process.

RECOMMENDATION 22 Page 412

The WA Government establish and fund a legal advice and referral service for ensuring those affected by forced adoption are able to receive free, independent legal advice about their options for accessing a redress scheme.

RECOMMENDATION 23 Page 416

The Attorney General introduce legislation similar to the *Civil Liability Amendment (Child Sexual Abuse Actions) Act 2018* (WA) amending the *Civil Liability Act 2002* (WA) and the *Limitation Act 2004* (WA) to remove limitations on claims relating to forced adoption.

FINDING 70 Page 418

Many people affected by past forced adoption are unaware of the decriminalisation of offences relating to contact vetoes. This includes people who have entered into undertakings in relation to contact vetoes.

RECOMMENDATION 24 Page 418

The Minister for Community Services direct the Department of Communities to contact individuals who entered into an undertaking about contact vetoes prior to the *Adoption Act 1994* 2012 decriminalisation amendments and provide updated information.

RECOMMENDATION 25 Page 419

The WA Government introduce an amendment bill repealing section 108 of the *Adoption Act 1994*.

RECOMMENDATION 26 Page 420

The WA Government introduce an amendment bill to:

- repeal section 103 and 82(4)(c) of the Adoption Act 1994
- amend section 82(4)(b) by deleting "83(2); and" and inserting instead - "83(2)."
- amend section 100(3) to remove the reference to section 103.

RECOMMENDATION 27 Page 420

The WA Government introduce a bill amending the *Adoption Act 1994* to convert existing contact vetoes into 'Statements of objection to contact' and place on a register.

RECOMMENDATION 28 Page 420

The Attorney General introduce a bill repealing section 100 of the *Adoption Act 1994* and providing for contact vetoes to no longer have an effect after 12 months of the amendments coming into operation.

RECOMMENDATION 29 Page 421

Prior to the date for contact vetoes ceasing to have an effect, the Department of Communities (Post-Adoption Services) is to contact every individual who holds a contact veto under the *Adoption Act 1994* and is to provide them with information regarding the amendments and details for services available to provide them with counselling and support.

RECOMMENDATION 30 Page 421

The Attorney General introduce amendments to relevant legislation to ensure that civil litigation on matters of past forced adoption (including those brought under any legislative changes resulting from Recommendation 23) can continue by the estate of the plaintiff.

RECOMMENDATION 31 Page 423

The Attorney General direct the Department of Justice to provide clear and current information about discharging an adoption and the forms required. This information be included on the Family Court of Western Australia website.

RECOMMENDATION 32 Page 424

The Attorney General introduce a bill amending section 124 of the *Adoption Act 1994* removing relatives under (1)(e) from the classes of persons whose identities are protected by that offence.

RECOMMENDATION 33 Page 425

The Attorney General introduce a bill repealing section 126 of the *Adoption Act 1994*.

RECOMMENDATION 34 Page 425

The Attorney General introduce a bill repealing section 127 of the *Adoption Act 1994*.

FINDING 71 Page 426

There are people who were adopted in Western Australia who are currently not aware of their adopted status.

RECOMMENDATION 35 Page 427

The Minister for Community Services direct the Chief Executive Officer of the Department of Communities to clarify the circumstances in which the Chief Executive Officer will and will not provide notification under section 80(1) or 80(2) of the *Adoption Act 1994*.

This include clarification that a lack of awareness by a party they are adopted, or have a relative who has been adopted does not constitute 'special circumstances' for the purposes of section 80(3) of the *Adoption Act 1994*.

RECOMMENDATION 36 Page 428

The WA Government notify all adult adopted persons not already aware of their adopted status.

FINDING 72 Page 428

Currently there is no clear process for an adult person to confirm whether they were adopted in Western Australia.

RECOMMENDATION 37 Page 428

The Minister for Community Services direct the Department of Communities (Post-adoption services) to implement a process for adults to apply for confirmation they are recorded as a party in any adoption in Western Australia.

RECOMMENDATION 38 Page 429

The Minister for Community Services direct the Department of Communities to publish accurate online information about the numbers and kinds of adoptions occurring in the state each year, legislation relevant to adoption, the status of reviews of that legislation and progress on implementing review changes.

RECOMMENDATION 39 Page 431

The WA Government establish an adoption reference group inclusive of mothers, fathers, adopted people, and First Nations people with lived experience of forced adoption, as well as relevant service providers when appropriate.

CHAPTER 1
The inquiry into forced adoption in WA

Origins of this inquiry

1.1 This report examines the historical removal of newborn babies from their mothers in WA, and the subsequent upbringing of those children by others, under what has come to be called 'forced adoption'. Some of these mothers were in relationships with the baby's father, and some were not, but none of them were married at the time of falling pregnant. Purportedly because of this, parents were denied knowing and parenting their children, and their children were denied their right to know and be raised by their parents. The harm these practices caused, and the laws and policies enabling them, has been known for some time.[8]

Over 13 years have passed between WA's apology and this inquiry

1.2 On 19 October 2010, as a result of campaigning by individuals, advocacy and support organisations, the Parliament of Western Australia was the first in Australia to apologise for the 'removal of children from unmarried mothers'. Then Premier Colin Barnett addressed the apology to 'the mothers, their children and the families who were adversely affected by these past adoption practices'. His short motion stated:

> (1) that with regard to past adoption practices, it is now recognised that from the 1940s to the 1980s the legal, health, and welfare system then operating in Western Australia, in many instances, did not strike the correct balance between the goal of minimising the emotional and mental impact of the adoption process on unmarried mothers, with the goal of achieving what was considered at the time to be in the best interests of the child;
>
> (2) that processes such as the immediate removal of the baby following birth, preventing bonding with the mother, were thought at the time to be in the mother's and the child's best interest;
>
> (3) that this house recognises that in some cases such practices have caused long-term anguish and suffering for the people affected; and
>
> (4) that the Parliament acknowledges that previous Parliaments and governments were directly responsible for the application of some of the processes that impacted upon unmarried mothers of adopted children.[9]

1.3 Like the apology, the debate that followed focused mostly on mothers. Adopted people were included as 'their children'. The Committee recognises that all surviving people affected by these practices are now adults.

1.4 In his contribution, Hon David Templeman MLA observed that, 'In many respects it is what is not in the apology that needs to be debated'. He stated:

> it is time for us to continue to lift the lid on this issue and to investigate it openly and transparently. In my view, it is time for a national inquiry into past adoption practices and policies in all states and territories within Australia. This should also include a direct, sincere and heartfelt apology in the federal Parliament. We need

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8 As early as 1958, 'the Special Committee on Native Matters warned that "removal of a child from his mother at an early age can cause serious psychological and mental disturbances"' (Human Rights and Equal Opportunity Commission, *Bringing them home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families*, Commonwealth of Australia, May 1997, p 98).

9 Legislative Assembly, *Debates*, 2010, p 7881.

> to also acknowledge the need for ongoing counselling for mothers, their children and their families into the future. It is also time for Western Australia, through this Parliament, to initiate a formal inquiry by a relevant standing committee into this issue. I believe it is also important for the churches and non-government organisations that operated the hospitals and hostels that were involved in these practices to consider an appropriate apology.[10]

1.5 At the time of WA's apology, inquiries into past adoption practices had been held in Tasmania (1999), and in New South Wales (2001). In the 13 years since WA's apology, the Australian Senate held a national inquiry (2012), which was followed by an apology by then Prime Minister Julia Gillard (2013). In response to the Senate's findings, apologies were given by all other States and the ACT. Victoria reported on its own inquiry in 2021.

1.6 In 2022, then Opposition Leader Hon Mia Davies MLA and Libby Mettam MLA called for WA to follow Victoria and conduct its own inquiry into forced adoption.[11]

1.7 The inquiry that led to this report began as a petition in the Legislative Council. Sponsored by Jennifer McRae and containing 318 signatures, petition 70 was tabled by Hon Lorna Harper MLC on 15 November 2022. The petition read:

> We call upon the Legislative Council of Western Australia to conduct a parliamentary inquiry to investigate the systematic and systemic removal of newborns from their mothers' care via past adoptive policies and practices (1939 - onwards). In 2010, the West Australia parliament was the first jurisdiction in the world to apologise for the illegal removal of newborns from their unwed mothers. However, we are now one of the last states left in Australia to conduct an inquiry. WA Survivors have waited decades for the government to accept their moral obligation, to publicly reveal the truths of this painful past. During the era of closed adoption, society treated teenagers and young women as a moral panic, punishing those who found themselves unmarried and pregnant. An estimated 63,000, West Australian mothers, fathers, sons or daughters have been permanently separated by adoption (DCD. ROADS, 2006). Adoption rates remained high in WA even after PM Whitlam created the single parent benefit in 1973.
>
> Survivors of past adoptions are not just numbers; they are West Australian people who were wrongfully burdened with a life of secrecy, shame, guilt and disenfranchised grief. For many adopted people, their lives are lived through the lens of pre-verbal/neonatal trauma (mother-loss), displacement and family estrangement. Hundreds of WA survivors have a lifelong VETO of no contact/no information held over them, against their will. An inquiry would give survivors the opportunity to share their lived experiences protected by parliamentary privilege. An inquiry will shed much needed light on those who have yet to openly disclose and take full responsibility for their role in the states past adoptive practices. Importantly, legislation reforms are required for adopted people, so they can access the same human rights as non-displaced people.[12]

1.8 At the Committee's request Jennifer McRae provided a full submission in support of the petition.[13]

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10 Legislative Assembly, *Debates*, 2010, p 7888.

11 C Moodie, 'Inquiry into forced adoptions needed to address challenges facing survivors, WA opposition says', *ABC News*, 20 October 2024, accessed 22 July 2024.

12 Tabled Paper 1805, Legislative Council, 15 November 2022.

13 J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023.

1.9 In December 2022, then Minister for Child Protection, Women's Interests, Prevention of Family and Domestic Violence and Community Services, Hon Simone McGurk MLA, wrote to the Committee, stating:

> After consulting with the Minister for Health and Mental Health and the Attorney General, I am requesting that the Committee inquire into historical forced adoption practices in WA.[14]

1.10 Dr Katrina Stratton MLA also sent a letter of support.[15]

1.11 The Standing Committee on Environment and Public Affairs resolved to conduct an inquiry into past forced adoptive policies and practices on 22 February 2023, with the following terms of reference:

> To inquire into the past adoptive policies and practices of the twentieth century, notably the years between 1939 and 1980.
>
> In particular, the Committee will seek to:
>
> 1. understand the lived experiences of those affected by historical forced adoption practices
>
> 2. examine the role of the State Government, health services and private institutions in these practices
>
> 3. identify what measures are currently available to assist persons experiencing distress, their effectiveness, and how those persons may be supported further
>
> 4. consider any other matter that arises during the course of the inquiry deemed to be relevant by the Committee.[16]

1.12 The Committee acknowledges the sustained work of people affected by forced adoption and the organisations that support them in bringing this matter to the Parliament's attention: prior to the 2010 apology, in the intervening years, and in building support for the petition that began this inquiry.

Focus and scope of this inquiry

1.13 The Committee has been deliberate in its focus on WA through this inquiry. It has been informed by the reports of the inquiries that have already been conducted elsewhere in Australia. Rather than replicate relevant aspects of that work, the Committee has emphasised what the inquiry uncovers that is specific to what took place in WA.

1.14 The Committee followed the terms of reference and considered all evidence pertaining to last century. However, it let the evidence show the years that are most relevant to people today. The earliest lived experience evidence relates to 1948, and the latest to 1981. Most of the cases described in the lived experience evidence relate to the late 1960s and early 1970s. The span of this evidence reflects only those who were living, aware, willing and able to contribute to this inquiry.

1.15 The Committee took a broad view of what constitutes an example of forced adoption, as discussed in the following chapter.

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14 Hon S McGurk MLA, letter, 13 December 2022.

15 Dr K Stratton MLA, letter, 15 December 2022.

16 Standing Committee on Environment and Public Affairs, report 61, *Terms of reference: Inquiry into past forced adoptive policies and practices*, Legislative Council, 22 February 2023.

1.16 This report is not a comprehensive examination of all aspects of past adoption. There is already a body of literature relevant to this period of history, both in Australia and overseas, and the Committee recognises that many individuals affected by forced adoption have themselves become expertly read on the topic. It points readers to the public submissions from those with lived experience, expert knowledge, or both.

1.17 From their time conducting this inquiry, Members know that there is nothing 'past' about forced adoption for the people who experienced it, and for their families.

1.18 Evidence clearly demonstrates that, though the act of separating mothers and their babies happened last century, the effects are lifelong, and still felt today. This report delves into that impact, and what can be done now to ameliorate it. However, it does not address adoptions yet to occur in WA under existing or future laws.

1.19 The report does not address adjacent issues such as international adoption, donor conception and surrogacy. It is valid and understandable that some people impacted by forced adoption have concerns about these practices and want to prevent others facing hardships similar to those they endured. However, to ensure the Committee gave forced adoption experiences the attention they deserve, it maintained a focused scope for this inquiry.

1.20 These related, complex issues were not advertised as being topics of this inquiry. It is important that all relevant stakeholders have the opportunity to contribute to any examination of these practices, and this includes people with lived experience of forced adoption. However, the Committee believes that people affected by forced adoption have much to contribute to the way WA faces these complex issues into the future, and this is discussed in Chapter 15.

1.21 The third term of reference for this inquiry is about how survivors of forced adoption can best be supported. The Committee recognises that, for those who have suffered the trauma of past adoption practices, the meaning and healing potential of apologies and reparations is reduced if similar harms were to continue, through modern-day adoption or parallel practices.

1.22 The Committee shares the views of many contributors to this inquiry that it is vital for WA, going forward, to look carefully at all scenarios affecting childrens' origins and their family upbringing.

Reach of this inquiry

1.23 While the Committee is a parliamentary committee of 5 members, with powers to take any evidence it deems relevant, it is worth covering some constraints that applied to this inquiry.

1.24 This committee was created by the Legislative Council to inform Parliament about matters arising from petitions, as well as those affecting the environment. Its terms of reference can be found at the back of this report. As with all of WA Parliament's committees, this committee can make findings and recommendations; however, it is only when a report recommends action *from the State Government* that a response is required. Further, while the Government must respond to the Committee's recommendations, they are not bound to act on them.

1.25 While this report considers the actions of both current and previous governments in relation to forced adoption, it also examines the role of private institutions and service providers. The Committee expects that those private institutions existing today will take full responsibility for any harm they caused, but it cannot compel them to respond to the findings in this report.

1.26 Similarly, the Committee has no way of insisting on change at the federal level, except by recommending that the WA Government approach the Australian Government.

1.27 For these reasons, the Committee has channelled its efforts towards identifying the concrete actions that can be taken by the WA Government to best acknowledge the damage done by forced adoptions and to best support those affected from this point on.

Inquiry process

1.28 Understanding the lived experiences of people affected by forced adoption was central to this inquiry and important to the Committee. The inquiry process included the following:

- advertising the inquiry on social media, *The West Australian* newspaper and 24 other local newspapers across WA
- inviting all Members of Parliament to refer affected constituents to the Committee
- placing a poster in the 104 member organisations of the WA Community Resources Network
- publishing background to the inquiry and information and guidance on making submission documents on the inquiry webpage
- accepting submissions through a dedicated portal on Parliament's website, email and post, and in written, video and audio formats
- extending the formal deadline for submissions from 21 April 2023 to 16 June 2023, and continuing to accept new and additional submissions throughout the inquiry
- accepting all requests to keep evidence private or anonymous from contributors with lived experience, and generally not publishing personal records
- redacting identifying details where submitters did not want to be named, or where evidence related to third parties or unproven allegations, and information that did not relate to the terms of reference
- committee members and staff completing trauma-informed training
- hearing from as many individuals who indicated a wish to appear in person as possible and holding these as closed hearings
- providing the option of on-site counselling to most individual witnesses who gave evidence
- sending updates to lived experience contributors to keep them informed of progress on the inquiry and what to expect.

1.29 The Committee travelled to Albany to hear from witnesses from across the region. It also held briefings with relevant professionals, attended the 'Empty Arms, Broken Lives' memorial at Read Park in Victoria Park, and visited the Forced Adoption Support Service run by Relationships Australia WA in Belmont.

The evidence upon which this report is based

1.30 The Committee received 154 submissions to the inquiry, and 48 additional submissions. It held 38 hearings: 8 public, and 30 closed sessions. In sum, 165 people or organisations contributed to the inquiry, and the evidence totalled over 5,850 pages. Appendices 2 and 3 contain lists of all submissions received, and hearings and briefings held. All public evidence is available on the Committee website.

1.31 Three quarters of inquiry contributors were individuals with lived experience, as follows:

- mothers – 45
- fathers – 2
- adopted people – 60
- adoptive parents – 2
- other family members – 13.

1.32 The Committee received some evidence from First Nations people, as well as evidence relevant to their experiences of forced adoption. The experiences of fathers were notably underrepresented, as were the experiences of people who endured some forced adoption practices but managed to keep their babies. Of the latter, the inquiry received 2 clear examples and one potential example relating to WA.[17]

1.33 While most of the evidence relates directly to events that took place in WA – including to women who travelled to WA for confinement and birth – the Committee also received submissions from people who left WA and travelled interstate or overseas to give birth, as well as women who gave birth under forced adoption elsewhere but now access support in WA. We also thank those who shared experiences entirely outside of WA in support of their WA counterparts, as their information added context and increased our awareness and understanding.

1.34 In all, the lived experience evidence received documents 80 clear instances of forced adoption in WA last century.[18] Some of the evidence received from different contributors relates to the same instance of forced adoption. For example: from a mother as well as that mother's now adult adopted child, or the father, or her current partner, or her subsequent children, or from an adopted person and their adoptive parent, or combinations of these.

1.35 Instances of forced adoption in evidence spanned from the 1940s to the 1980s. Table 1 breaks down this evidence. Most evidence relates to the late 1960s and early 1970s.

Table 1. *Dates of WA forced adoptions in evidence*

Decade	WA cases in evidence
1940s	2
1950s	8
1960s	30
1970s	31
1980s	4
no exact date	5
Total	**80**

Year	WA cases in evidence
1965	3
1966	3
1967	4
1968	9
1969	7
1970	8
1971	6
1972	5
1973	5
1974	0
Total	**50**

[17] Submission 52, Submission 75 and Submission 3, respectively.

[18] These were the cases where it was known that an infant was made available for adoption against the mother's will.

1.36 Examples from evidence illustrate the findings of this report. Direct quotes are used extensively to let those with lived experience speak for themselves.[19] The report aims to convey the breadth and depth of experiences shared with the Committee, although it has not been possible to discuss every relevant aspect raised by contributors. Readers are encouraged to access the public evidence online. Selected quotes demonstrate the consistency or otherwise of some practices across time and in the various institutions involved. Again, inquiry contributors were only those alive, aware, able and willing to share their experiences. Therefore, some of the more severe cases presented from the evidence are likely not isolated incidents.

1.37 At the start of the inquiry, the Committee invited submissions from 46 stakeholders relevant to forced adoption in WA. These are listed at Appendix 1. Submissions were received from or covering 21 of these stakeholders, and responses to later letters asking targeted questions from a further 6. The Committee remains disappointed that some invitees chose not to participate, and with the limited nature of some organisations' engagement with this inquiry. Despite the timeframe of this inquiry providing ample opportunity for both government and non-government actors to be proactive about the records they hold, few were so.

1.38 This report is based on evidence the Committee received, as well as additional legal and statistical research.[20]

1.39 The report is structured in a rough chronological order: beginning with the existing legal frameworks, addressing experiences of forced adoption, the roles of government and private institutions, the ongoing impacts of family separation, experiences with records, searching, reunions and support services, what accountability looks like and what is required to support survivors now and into the future.

1.40 The experiences of parents, especially mothers, and their children who were adopted and are now middle-aged or older are distinct, and, significantly, separate. In this report, they are discussed in parallel at times to highlight similarities and differences.

Ordinary language is used in this report

1.41 A number of contributors to this inquiry expressed that some of the language used around forced adoptions is disempowering and causes further harm. For example, the Committee heard that the term 'birth mother' 'reduces a mother to a vessel and is offensive'.[21]

1.42 The Australian Psychological Society, warned that:

> Using language in a way that implies consent for forced adoption practices (e.g., using the term 'relinquishing') or value-laden terms (e.g., referring to 'birth mother' rather than 'mother') may trigger shame, guilt or stigma for people affected by forced adoption.[22]

1.43 This report uses the simple language recommended in the guidance published by the Australian Government Department of Social Services: parent/s or mother/father, adopted person/people, and adopters or adoptive parent/s.[23]

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19 Quotes are reproduced uncorrected and as given.

20 The Committee is also aware of a large volume of information in the State Records Office archives of potential relevance.

21 Submission 46. See also: Submission 98; Submission 110.

22 Submission 91.

23 Department of Social Services, *Supporting people affected by forced adoptions*, www.dss.gov.au, 2023, accessed 11 December 2023.

1.44 Whilst the last placed importance on being married before parenthood, the Committee makes no distinction between kinds of parents. The report only refers to mothers as unmarried, or to births as 'ex-nuptial', to denote categories that applied at the time. The status of being unmarried was the basis for discrimination and ill-treatment against both mothers and fathers, although for women it carried additional shame. As one mother observed: 'I've never heard the term Unwed Father uttered in regard to the Fathers of our babies.'[24]

1.45 Although terms such as 'single mother', 'single parent' and 'sole parent' are used today, they were generally not in the evidence. Further, some mothers were not single or sole parents, but were in ongoing relationships with their child's father or another partner.

1.46 Lastly, some evidence contributed to this inquiry refers to children as illegitimate. This language was used in adoption legislation in WA prior to 1977. The report only uses the term if it is written that way in the source being cited, or when considering the legislation and legal principles using the term.

Contributing to this inquiry took great courage

1.47 The Committee is acutely aware that many people with experience of forced adoption in WA have not contributed to this inquiry. Some of them have passed away, some have taken their own lives. For some it is unsafe to delve into this topic, for some they have been silenced for so long that they cannot speak about it. Despite our sincere efforts, the narrow confines of a parliamentary inquiry did not make it possible for some who wanted to contribute to do so.

1.48 It is clear that the people who contributed did so out of a sense of responsibility, including to speak out on behalf of those who cannot or who are not here. The acts of formulating submissions and giving evidence were extremely difficult and taxing for these survivors. Many spoke directly of the struggles they engaged in to participate, and the impossibility of presenting a full or ordered account of events that threw their lives into chaos. Some submissions contain small errors, but the report presents them as written.

1.49 The Committee acknowledges the strength of every person who contributed to this inquiry and values their evidence. We also thank the people who supported the contributors, and continue that support.

1.50 Crucially, people affected by forced adoption participated in this inquiry because systems that failed them in the past are still failing them. As one witness attested:

> The people who are coming to you and writing their submissions are putting something so incredibly private and personal, and you do not do that unless you want change. … What happened to us is criminal and what happened to our mothers is criminal. I want people to know about it and I want to see change. … You want change faster than it is happening, because people are dying. People do not know they are adopted. People who have family and do not know they have family, and living very lonely lives because they do not know why.[25]

1.51 The Committee invites readers to consider their own divergent experiences and to heed contributors' earnest invitations to try and understand what they have lived through.

> Adoptees often refer to the non-adopted population as "kept people". … it is essential that you acknowledge this privilege of having experienced a lifelong connection to your family of origin. This seemingly normal experience makes it very difficult for kept people to comprehend the lived experiences of adopted

[24] Submission 6.

[25] Private individual 4, transcript of evidence.

people, who will never enjoy the many privileges of being kept. Please consider your kept privilege as you enter our world of secrets, lies, stigma and shame.[26]

> If you or your daughter had a child stolen like I did, how would you think and feel?
>
> - Name withheld, submission 115

[26] Private individual 1, transcript of evidence.

CHAPTER 2
The forced adoption era in WA

2.1 This chapter presents an overview of the evidence that describes forced adoption as lived experience. It outlines the main actors involved in adoption and the adoption process. The chapter examines kinds of force encapsulated by the general term 'forced adoption', as well as considering the context in which practices occurred in WA, and relevant statistics.

2.2 The following chapter examines the legal context in which adoption developed in WA.

What was forced adoption?

2.3 The evidence shows that no 2 people's experiences of forced adoption are exactly the same, but there is also a high degree of concurrence between different experiences.

2.4 In general terms: under forced adoption practices and policies in WA at the time, unmarried women were channelled into an adoption process, often early in their pregnancies, and sometimes without their knowledge. Many spent time in private institutions in the lead up to their births, where they variously worked unpaid, were psychologically abused, and were kept isolated. Pregnant women, fathers-to-be and their parents were pressured into agreeing to adoption, and women were subjected to coercive messaging that they were not fit to parent and that their children would be better off brought up by others. Some were told that if they loved their child, they would give it up.

2.5 Many women endured horrific treatment when they birthed, whether in confinement institutions, or in public or private hospitals. Mothers had their babies taken at birth and were prevented from accessing them prior to signing any consent to their adoption. This practice facilitated obtaining their signed consent. Adopted people were institutionalised as babies for days, weeks or months.

2.6 The processes by which consent was obtained for babies' adoptions, or dispensed with, were coercive, deceptive, flawed or unlawful. Some mothers were unfit to sign consent, not informed, and/or were threatened or otherwise pressured into signing their consent. Many mothers were misled as to where their children were at different points and thought they had been placed with prospective adoptive parents when that was not the case. Adoptive parents were not vetted, barely checked, or inadequately assessed.

2.7 Adopted people's original birth certificates, which rarely listed their fathers even when known, were cancelled and replaced with ones which made them appear the biological children of their adoptive parents. Access to information or records about adoptions was heavily restricted, which prevented parents from accessing information about their children, or children about their parents, until those restrictions were progressively lifted over the course of years. Some adopted people were never told they were adopted, and some still do not know. Both mothers and adopted people continue to suffer because of these events, and many report their trauma only worsens with time.

2.8 The inquiry was provided little evidence on the formal policies of government agencies and non-government institutions relevant to past forced adoption.[27] However, evidence showed widespread practices and common procedures at those agencies and institutions.

[27] In relation to there being no policy on babies for adoption at KEMH, see: Submission 154.

Who was involved in past forced adoption in WA?

2.9 The people affected by forced adoption include adopted people, mothers, fathers, adopters, siblings, grandparents and extended family, and the subsequent generations descended from them.

2.10 Agents who played an active role in forced adoption in WA included the Child Welfare Department and later Department for Community Welfare, public hospitals, private maternity institutions and hospitals, private medical practitioners, lawyers, and the courts.

2.11 Most evidence relates to King Edward Memorial Hospital ('KEMH'), Ngala Mothercraft and Training Centre ('Ngala'), and Hillcrest Maternity Home/Hospital ('Hillcrest'). The Glossary lists the main public and private institutions involved.

2.12 In this report, references to 'the Department' mean the government department *at the time* with responsibilities under the *Adoption of Children Act 1896* (WA) (Adoption of Children Act), and then the *Adoption Act 1994* (WA) (Adoption Act). The Department has had different names at different times, as follows:[28]

- Public Charities and State Children Department: 1908 to 1917
- State Children Department: 1917 to 1927
- Child Welfare Department: 1927 to 1972
- Department for Community Welfare: 1972 to 1985
- Department for Community Services: 1985 to 1992
- Department for Family and Children's Services: 1995 to 2001
- Department for Community Development: 2001 to 2007
- Department for Child Protection: 2007 to 2013
- Department for Child Protection and Family Support: 2013 to 2017
- Department of Communities: 2017 to present.

The adoption process transferred legal guardianship

2.13 The legal effect of an adoption order was that the adoptive parents became the legal guardians of the child, and the parents ceased to be so. As it developed, the law clarified that between consent being signed for a child to be adopted and the making of an order of adoption in the courts the child was under the legal guardianship of the state. In the forced adoption era, children were removed prior to signed parental consent. Some children were also placed with adoptive parents prior to any consent to adoption being given. For many, placement occurred months or years before an adoption order was made.

Closed adoptions kept, and continue to keep, adoption secret

2.14 As prefaced above, access to information or records about all adoptions was heavily restricted for most of the 20th century. This prevented parents from accessing information about their children, or children about their parents, until those restrictions were progressively lifted over the course of years. The names of adopted people were changed, and their birth certificates were re-registered as if they were born to their adoptive parents.

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[28] A brief history of the Western Australian child welfare system is available at Find and Connect, *Searching in Your State*, accessed 18 July 2024.

2.15 Although some adopters were encouraged to tell adopted children of their status, many did not. Some adopted people discover they are adopted late in life. Some adopted people still do not know that they are adopted.

'Forced adoption' is an inaccurate, inadequate but widely used term

2.16 In the lived experience evidence, the words people used to describe what happened to them include theft, abduction, kidnap, trafficking, discrimination, bullying, coercion, official collusion, conspiracy, extortion, blackmail, deception, fraud, abuse, and torture.[29]

2.17 The Committee agrees with the general view expressed by many contributors that forced adoption is a problematic and unhelpful term. To many mothers, their experience was of their child being stolen, and adopted people also speak of being stolen.[30] Many children removed from their mothers were subsequently adopted, but some were not. The practices occurred regardless of whether adoption eventuated.

> When people hear the word adoption they immediately think of an abandoned baby and a saviour couple. In our case this could not be further from the truth. It is the outcome of a hundred years of propaganda and gaslighting Australian society to accept the absurd notion that thousands of healthy young mothers denied their most primal instinct and gave away their babies to strangers so they "could get on with their lives. … Labelling what happened to us as 'Forced Adoption' is to downplay, minimise and white wash our experience. Forced adoption sounds as if because of lack of finances, abortions or birth control pills we were 'forced to make a decision' to 'relinquish' our newborns. To be told we had a 'choice' or 'made a decision' or 'relinquished' is so against the reality of what happened, such a blatant distortion of reality, it can only be labelled absurd. … There was NO choice, NO decision made and when our babies were abducted at the birth, we had given no permission for them to be taken. When we asked to see them we were denied. At the birth of our babies we were no more under the Adoption Act than under the Migration Act. … Just like my Indigenous sisters I want to be able to say my baby was stolen, what happened to me was barbaric, no excuses, no justifications no more gaslighting. MY BABY WAS STOLEN.[31]

2.18 The Committee also agrees with the observations of lived experience participants that 1) no one can be forced to adopt a child, and 2) all adoptions of infants are forced upon them.[32] Adopted people submitted:

> The adoption, in my case, was forced. I did not, and have not, ever agreed to it nor has my consent ever been requested. I have not ever been asked how it's worked out and if I'm OK. I'm not.[33]

> Had we been given a choice and a voice NONE of us would have consciously chosen an unknown human over our mother, father, and family.[34]

2.19 In their submission, the Adoption Research and Counselling Service (ARCS) explained that the term 'forced adoption' can exclude those to whom it tries to refer:

> Forced adoption is often perceived as the forceable removal of a baby from the mother to be adopted. However, in our opinion the term "forced" can also be

29 For example: Submission 124a; Submission 59; Submission 72.

30 For example: Submission 103; Submission 112.

31 Submission 72.

32 For example: Submission 5; Submission 46.

33 Submission 57.

34 Submission 110.

> applied to practices where information on alternatives to adoption were not offered, the financial assistance available was not discussed, there was pressure to consent, the right to revoke consent was not explained, the psychological pressure of the messaging "if you love your baby you will give them up". The disempowerment of women by isolating them from family and shaming them for being pregnant and unmarried. Many of these factors continue to impact the decisions of women considering adoption to this day.
>
> Some mothers do not identify as having experienced a forced adoption. These women were often subjected to the messaging from hospital staff and social workers that "if you loved your child you would give them up". They were told they had nothing to offer their baby and the child needed a married couple to raise them.
>
> The mothers who held on to this belief of equating loving their child to giving them up find it difficult to allow themselves to express grief as they have survived losing their child through believing it was their decision based on love.
>
> Other women struggle with the term "forced" adoption because they don't want to be labelled as victims. They speak of being shamed and disempowered at the time of relinquishment and don't want to be seen in the same light in the present. They see themselves as survivors and don't wish to revisit the past.
>
> Adopted people can also struggle with speaking of being affected by forced adoption practices. They can feel they are being disloyal and ungrateful to their adoptive parents by doing so. The impact on the child and the adult can be overlooked as they were babies at the time of adoption.[35]

2.20 Similarly, Jennifer McRae explained that the term 'inadvertently excludes many from identifying they were impacted by past adoptive policies and practices'. For some,

> the use of the word forced in reference to their adoption experience is incredibly difficult to reconcile. There are many reasons for this, unique to the individual, their lived experience, personal style of coping mechanisms and how deeply one has delved into undercovering what happened to them through the acquisition of personal records and speaking their family and other witnesses.[36]

2.21 Ms McRae raised concerns that the 'word "forced" could also be weaponised against survivors should there ever be a redress program or legal proceedings, where survivors will be required to prove adoption was 'forced' upon them'.[37]

2.22 The Committee agrees that 'the word "forced" is an umbrella term used to describe a collective experience of past adoption practices and policies'.[38] Unfortunately, there is no succinct way of capturing the broad range of terrible practices that survivors endured. The term 'forced adoption' is used in inquiry reports from other jurisdictions, and it seems to have become widely accepted as a shorthand way of referring to these practices in their many guises. For the sake of brevity, the Committee uses the term in this report, and asks the reader to bear the above shortcomings of the language available in mind.

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35 Submission 113.

36 Submission 110.

37 Submission 110.

38 Submission 110.

The word 'forced' includes a variety of experiences

2.23 A central principle behind adoptions throughout the 20th century was the consent from certain people to the adoption. This always included the child's mother, but did not always include the father. The consent was confirmed in writing so that it could be used in a court. The signed form was meant to indicate that a parent had given free and informed consent to the adoption of their child. However, this was often not the case, and in the evidence before the Committee there was an element of force applied to many parents in order to secure their signature. This force was not always physical, although for many contributors there was a physical element. The force often had psychological, emotional, and social elements.

2.24 The Committee recognises that coercion would include circumstances where a mother has signed a consent to adoption, but only as a result of family or institutional pressure. It may also include circumstances of economic disadvantage or lack of support systems, meaning that a young mother could not afford to keep the child.[39]

2.25 Committee evidence includes a wide variety of experiences that it regards as constituting forced adoption, which included different elements of force. These include the withholding of relevant information, threats and coercion, being made to feel that adoption was the only choice available, the removal of babies, and the absence of any form of consent. No situations explained to the Committee meet contemporary notions of valid consent.

> I refer to myself as a 'mother' and my child as my 'daughter' as the adoption consent I signed is questionably legal as it was not an informed consent, meaning it was given without my full knowledge of the consequences. I will use words 'forced', 'removal' and 'confinement' …. because our separation was anything but voluntary.[40]

2.26 In many instances reported to the Committee, the callousness with which children were taken from their mothers is shocking. Readers are urged to take care when going through this report.

Context

Forced adoption occurred in the context of social change

2.27 The twentieth century was a time of great social change, in particular in relation to attitudes to sex and marriage, women's rights (including reproductive health options), children's rights and parental support.

2.28 The below table[41] summarises some of the events relevant to forced adoption, including as they took effect in WA.

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39 As set out within the Committee's Background to the Inquiry, available online at parliament.wa.gov.au.

40 Submission 124a.

41 Sources: Heritage Council, *A Thematic History of Western Australia*, Government of Western Australia, 2022, accessed 1 May 2024; ABS, *A century of population change in Western Australia*, Western Australian Statistical Indicators, 2001, accessed 26 March 2024; ABS, *History of pensions and other benefits in Australia*, Year Book Australia, 1988, accessed 26 March 2024; R Hall, 'Notifiable diseases surveillance', *Communicable Diseases Intelligence*, 1993, 17:226-236, accessed 1 May 2024.

Table 2. *Relevant social changes across the inquiry period*

Year	*Change*
1904	WA Public Service requires women to resign when they marry (restriction retained until 1967).
1930s	Global depression in early 1930s resulted in high unemployment. Drought had widespread effects. Decade characterised by lower standards of living, reduced food supply & declining birth rates.
1934	WA birth rate lowest at 17.6 per 1000.
1940s	Severe labour shortages due to the war, women take up more jobs, government support payments expanded.
1942	*Widows' Pensions Act 1942* (Commonwealth).
1949	Minimum wage for women reaches 75% of male equivalent.
1950s	Characterised by a sustained boom period following the war, expansion of social services and foundations of modern welfare state.
1950	WA tuberculosis cases peak at 604.[42]
1952	WA birth rate highest at 25.7 per 1000.
1960s	Society became more permissive, and religion exerted less political influence. Social activism developed. Government services expanded further.
1961	*Welfare and Assistance Act 1961* (WA) passed, providing for financial assistance for 'indigent persons'.
1967	Referendum acknowledges Aboriginal citizenship.
1970s	Expanded social services (such as family violence refuges and childcare), work related reform (equal pay legislation and maternity leave), and government benefits directly assisted women.
1970	Adoption placements peaked in WA at 673.
1970	Significant amendments to the *Adoption of Children Act 1896* (WA) commence.
1972	*Age of Majority Act 1972* (WA) lowered age of majority from 21 to 18.
1972	Australian Conciliation and Arbitration Commission rules in favour of equal pay for equal work.
1972	WA Child Welfare Department and WA Native Welfare Department combine to form the WA Community Welfare Department.
1973	Supporting Mother's Benefit introduced by the Commonwealth for single mothers not entitled to the widow's pension.
1973	*Maternity Leave (Commonwealth Employees) Act 1973* (Commonwealth) passed.
1974	Adoption orders peaked in WA at 783 (700 ex-nuptial).
1975	WA birth rate on par with 1934 low at 17.6 per 1000, continues to fall from then on.
1977	Supporting Parent's Benefit (Commonwealth) eligiblilty extended.
1980	Supporting Parent's Benefit (Commonwealth) – six month waiting period abolished.

[42] Some submissions referrred to an infertility crisis attributed to high rates of tuberculosis post-war.

2.29 Together with social change, the legal framework to adoption also changed significantly throughout the 20th century, as multiple amendments were made to the legislation, and rules regarding the legal processes and procedures were set out. Those changes affected whose consent was required for an adoption, how and when that consent could be obtained, how the records of adopted people were affected by adoption, and the degree of investigation into prospective adoptive parents.

2.30 Of the profound changes occurring within Australian society concurrent with forced adoption, the brother of a mother who lost her child to forced adoption submitted:

> It astounds me that In the time of the "Psychedelic revolution" Haight Ashbury and "All You Need Is Love" – young mothers were subjected to this most unloving and pernicious practice of forced adoption.[43]

Ideas that informed forced adoption were not the only ideas at the time

2.31 The thinking underpinning adoption of children of unmarried mothers includes eugenics theory, which took different forms at different times, and can be traced back to British Poor Laws in the fourteenth century.[44]

2.32 Eugenics theory originally held that genetic influence was dominant, and hence the children of 'fallen' mothers were not desirable. However, after World War II the theory shifted to espouse that such children were a 'blank slate' and could be redeemed if they were raised in the 'right' environment.

> Freudian developmental theory encouraged adoptions and argued for the early separation of mothers from their babies. This philosophy has come to be known as the 'clean break' or 'blank slate theory', and represents a significant departure from earlier eugenic practices of 'scientifically' nursing babies for at least the first year of their lives.[45]

2.33 The removal of babies from their unmarried mothers at birth, primarily sight unseen, and the restriction of access between mothers and newborns are both attributed to 'clean break' theory. However, although this theory was influential, it was not universally supported. The evidence discussed in this report suggests that in practice this theory was applied inconsistently, often to the point that it made no sense.

2.34 Alongside, a 'general entitlement mentality advocating the "right" of all legitimate couples to have children' developed from the 1950s. Accordingly, some people saw adoption of the children of unmarried couples by (often) infertile married couples as a neat solution, and in interests of the child's welfare. This view was also not universally held.

2.35 Dr Christine Cole's research demonstrates that 2 contrasting discourses existed in relation to unmarried women and their children in the twentieth century. 'Institutional discourse' said unmarried 'mothers "chose" adoption because they did not want their babies. It emphasised 'the stigma of unwed motherhood', the unfitness of unmarried mothers and the lack of means. By contrast, the 'lay discourse' supported unmarried people to keep their babies, and included ideas such as:

- The baby is 'our flesh and blood and belongs with its family'.

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43 Submission 8.

44 C Cole, *Stolen Babies - Broken Hearts: Forced Adoption in Australia 1881–1987*, unpublished doctoral thesis, University of Western Sydney, June 2013, volume 1, in Submission 72.

45 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, pp 20-22.

- 'Anyone can make a mistake, and it is only human to give birth and want to keep your child'.
- 'What kind of woman gives away her own flesh and blood?'[46]

The difference between these opposing positions explains the ongoing guilt and shame many mothers, and some fathers, expressed at *not* bringing up their own children.

Social context was not responsible for forced adoption

2.36 Some published literature, some Committee evidence, and WA's own apology, refer to forced adoption as something which occurred because of the social conditions and beliefs at the time. In particular, the shame and stigma of pregnancy outside of marriage and the lack of support for unmarried parents are often cited, not just as factors contributing to an individual's particular experience, but as being determinative of the phenomenon of forced adoption in general. The Committee's view is that this is incorrect.[47] This was stated plainly in the Parliament of WA prior to the State's apology:

> It is time that we do not simply dismiss this as a social moray [sic] of the day, which is a common belief. That is wrong. What happened was wrong. It involved the removal of babies from their natural mothers at birth, in many cases by illegal means, and also through threats, coercion, intimidation and the use of drugs.[48]

2.37 Inquiry evidence explodes the notion that, due to stigma, very young, unmarried women, with no means of support, willingly gave up their babies so they could have a better life with well-off married couples. Rather, as this report shows:

- mothers wanted their babies
- some mothers were over 21 or 18 (the ages of majority before and after 1972)
- some mothers lived independently, and were employed
- some mothers had the support of the father/their partner and/or their families
- some financial support was available, child maintenance was legislated, and unmarried people and widowers were legally allowed to adopt for most of the 20th century
- some adoptive parents were themselves not married
- some adopted children ended up being raised in single-parent families, or by other adoptive relatives, due to divorce, or the death of one adoptive parent
- some adopted children were abused in their adoptive families
- all adopted people suffered in some way from their adoption

and, significantly

- most unmarried mothers kept their babies.

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46 C Cole, *Stolen Babies - Broken Hearts: Forced Adoption in Australia 1881–1987*, unpublished doctoral thesis, University of Western Sydney, June 2013, volume 1, pp 94-95, volume 2, pp 23-27, in Submission 72.

47 The Senate and Victorian inquiries also rejected the claim that forced adoption was the 'inevitable result of the conservative societal attitudes of the 1950s to 1970s' (Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, p 19.) See also: Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, p 9.

48 Legislative Assembly, *Debates*, 2010, p 238.

Numbers relevant to forced adoptions

The exact number of forced adoptions is unknown

2.38 It is not possible to assess how many adoptions in WA last century were forced. The available data provides some indications, based on assumptions about the kinds of adoptions that may have been forced. However, drawing conclusions based on adoption records and figures is complicated by the following:

- forced adoptions were not documented
- not all adoptions were against the parent/s will
- not all adoptions were of infants or occurred soon after a child's birth
- total adoption figures included the children of both married and unmarried mothers
- some unmarried mothers kept their children at birth and adopted them into their later marriages, and these are recorded as adoptions
- some intra-family adoptions were not formalised
- the babies of some unmarried mothers became state wards in group homes or foster care and were not adopted, or were adopted at a later point.

2.39 Adoption information recorded in Department annual reports is compiled in Appendix 5. This section discusses that information alongside population data.[49]

2.40 The publicly available adoption data for WA is inconsistent across the inquiry period. For each of the relevant years, recorded adoption data is not always broken down to reveal categories within total adoptions. This includes whether adoptions were privately or publicly arranged, involved nuptial or ex-nuptial children, and whether adoptive parents were related to the adopted child or not.

2.41 Within these limitations, the Committee is able to make the following observations.

Most adoptions were of children of unmarried parents

2.42 Detailed data exists for the 11 years from 1968 to 1978 inclusive.[50] This data shows that most adoptions in that period were 'ex-nuptial' adoptions.[51] That ratio, while remaining high, began to decrease in the later 1970s. Before that, the figures are around and above 90% – see Figure 1.

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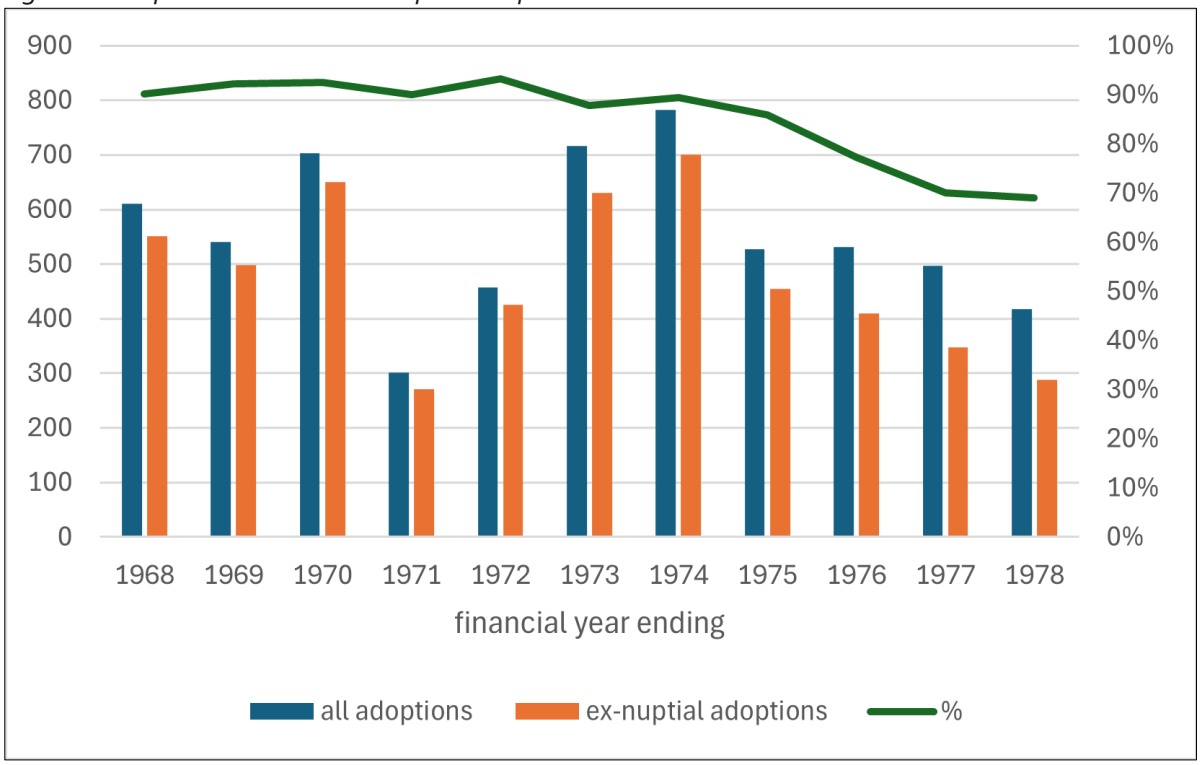
[49] This analysis focuses on the years most relevant to the lived experience evidence, especially between 1940 and 1990. Hansard (cited in Chapter 3) details some figures for the earlier part of last century. For example, it states that by November 1926 there had been a total of 822 adoptions since the introduction of the *Adoption of Children Act 1896* (WA): Legislative Assembly, *Debates,* 1926, p 2268-9. Breakdowns for some years reported in Hansard include: 40 children adopted in 1919, 82 children in 1920 (Legislative Assembly, *Debates,* 1921, Colonial Secretary 622) 85-87 adoptions in the calendar year up to September 1921 (Legislative Council, *Debates,* 1921, p 693), and 56 adoptions in 1925 (Legislative Council, *Debates,* 1926, p 3136).

[50] The more detailed adoption data available is based on financial years, whereas data pertaining to births is based on calendar years. Comparisons of the 2 conducted by the Committee involved inexact approximations for this reason.

[51] *Minute from the Director: Re Adoption of Children of Married Women, 3 February 1957*, attachment 2 to Submission 106 from Department of Communities, 20 June 2023 states 'It has been the practice in the past for the Department to refuse to handle the adoption of a child of a married woman, irrespective of circumstances…'.

Figure 1. *Adoption orders and ex-nuptial adoption orders in WA 1968–1978*



[Sources: Annual reports of Child Welfare Department 1927–1972; Annual reports of Department for Community Welfare 1972–1984, accessed June 2024]

2.43 Forced adoption happened to some families when the parents were not married when their child was conceived.[52] While not all ex-nuptial adoptions were necessarily forced adoptions, all forced adoptions in evidence involved ex-nuptial conceptions; all but one involved ex-nuptial births.

Most adoptions were of infants

2.44 The numbers of adoptions and ex-nuptial adoptions reproduced here do not reflect the age of the child adopted. Department records from the 1950s show that most adoptions were of infants:

> Three to four weeks is about the age a babe is generally adopted and it is very rarely an older child is available for adoption.[53]
>
> Most of the adoptions are arranged when a babe is four to five weeks old.[54]

2.45 In 1970, 60% of adoption orders made concerned children under one year old, and 20% were for children one year old.[55]

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52 Under its terms of reference, the inquiry did not receive evidence of ex-nuptial adoptions that were *not* forced. The Committee's understanding of the variety of adoption experiences across the inquiry period is inherently limited by this factor.

53 Child Welfare Department, *Annual Report 1951-1952*, 1952.

54 Child Welfare Department, *Annual Report 1953-1954*, 1954.

55 Of the years immediately following 1970, the researchers who produced *ROADS* observed: 'It may seem surprising that children appeared to become older at adoption as the decade progressed. However, what these figures report are Adoption Orders granted, so the babes may well have been with their prospective adoptive parents since early infancy. Changes to the Act and Regulations, which required more complex assessment and reporting to be put before the Court, meant that the workload in the Department was frequently too great for the existing

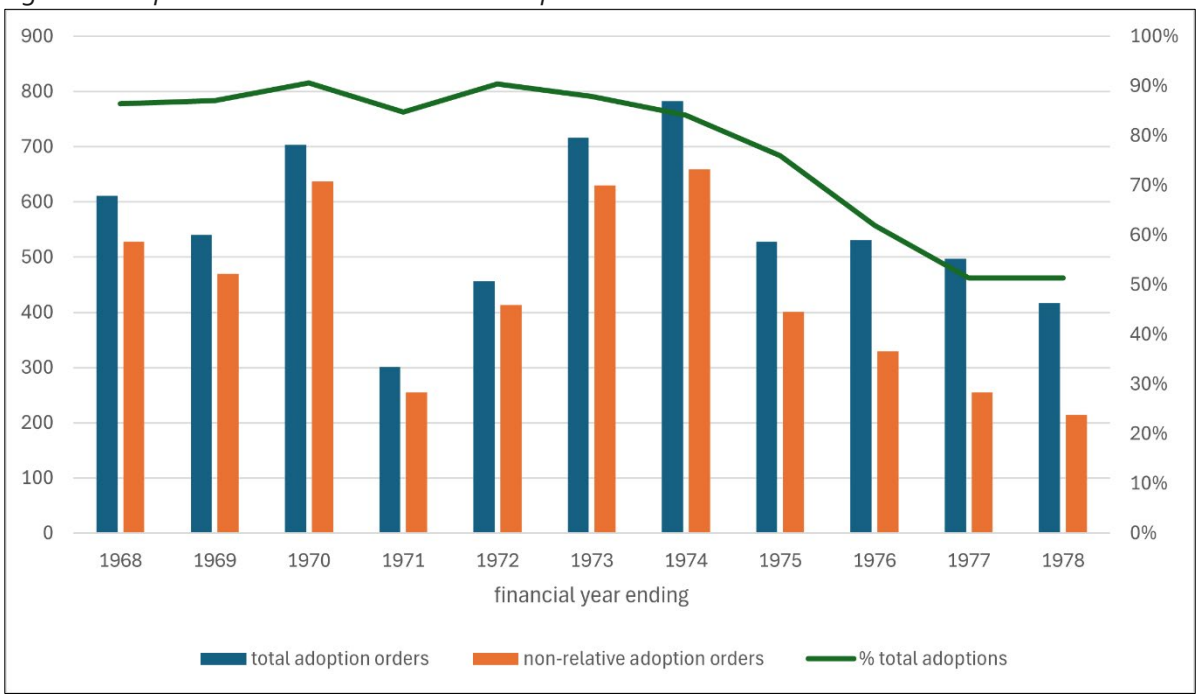
2.46 In most cases in evidence, children separated from their mothers at birth under forced adoption practices were placed with adoptive parents in their first year.

Most adoptive parents were not related to the child being adopted

2.47 The detailed data for this period also shows that some ex-nuptial children were 'adopted' into the subsequent marriage of one of their natural parents, or adopted by relatives. In the first instance at least one parent kept their child, so these are not cases of forced adoption.[56]

2.48 In relation to children adopted by their own relatives: none of the inquiry evidence of forced adoption received relates to a situation where someone other than a stranger adopted the child. This is not to say that those cases did not occur within families.

Figure 2. *Adoption orders and non-relative adoption orders in WA 1968–1978*



[Sources: Annual reports of Child Welfare Department 1927–1972; Annual reports of Department for Community Welfare 1972–1984]

2.49 For the period when data for ex-nuptial adoptions is available, it is not consistently broken down into relative and non-relative adoptions. Figure 2 shows that, for the period data is available, most adoptions were non-relative adoptions.

complement of staff to handle (Annual Report of the Department for Community Welfare, June 30th 1974). Thus, procedural and staffing issues contributed to a backlog of applications and, possibly, older ages by the time the final Order was granted.' (Department for Community Development, *ROADS: An index to locations and access to adoption records*, 2004, p 117.)

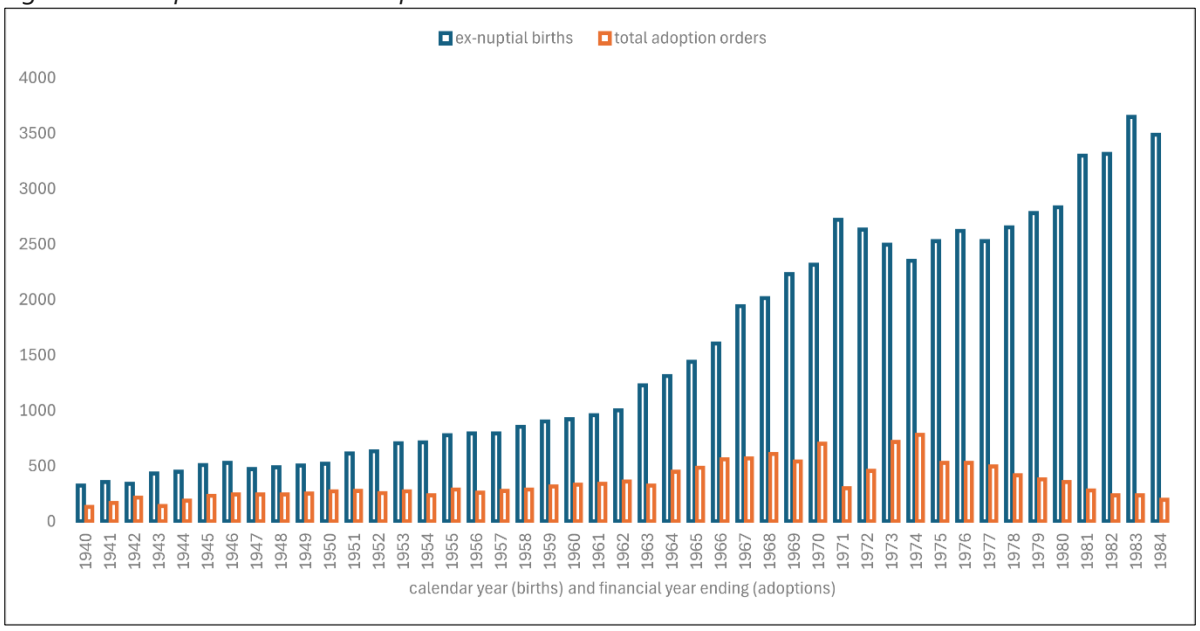
[56] The Committee did, however, receive evidence of closed adoptions where the adopted person grew up believing that her mother's husband was her father at birth: see Submission 75.

Most unmarried mothers kept their children

2.50 Comparing the total number of adoption orders to ex-nuptial births across the inquiry period shows that the majority of unmarried mothers did *not* lose their children to adoption – see Figure 3.

2.51 Orders of adoption for children of unmarried mothers in WA peaked in 1974 at 783; however, that year there were 2,353 ex-nuptial births.[57]

Figure 3. *Ex-nuptial births and adoption orders in WA 1940–1984*



[Sources: Western Australian Year Book (various years); Annual reports of Child Welfare Department 1927–1972; Annual reports of Department for Community Welfare 1972–1984]

2.52 Some babies separated from their unmarried mothers at birth were raised by another family member, or fostered out, and are not captured in figures for adoption. Some that were adopted at a later age are reflected in the data at that point, rather than around their birth.

2.53 The available statistics lack the detail to determine the significance of these crossovers across the inquiry period. For the few years that figures are recorded, they are proportionately low. It is probable that, as reported elsewhere in Australia, most unmarried mothers in WA kept their babies.[58]

2.54 Unmarried women who experienced forced adoption were therefore in the minority of unmarried women who gave birth in WA. This is not to diminish their evidence, but to explain that the experiences described in this report were not those that automatically followed for all women who were not married when they conceived. Strong forces enacted on a selection of women to effect a different outcome than that experienced by most of their counterparts in the same situation.

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57 These figures compare calendar years to financial years and are therefore only indicative.

58 For example: Submission 72; Submission 95. In her submission, Dr Christine Cole discusses research commissioned by the New South Wales government that found approximately 60% of unmarried mothers kept their babies between 1923 and 1976 (see Submission 72, p 67). She also cites research by Kerr that 66% of mothers kept their babies in WA in the 1930s and 1940s (R Kerr, *The State and Child Welfare in Western Australia 1907–1949*, unpublished thesis, Curtin University of Technology, 2005, cited in C Cole, *Stolen Babies - Broken Hearts: Forced Adoption in Australia 1881–1987*, unpublished doctoral thesis, University of Western Sydney, June 2013, volume 1, p 22, in Submission 72).

Yearly figures for placements and adoption orders do not correspond

2.55 While figures showing the number of adoption orders made are available across the inquiry period, detailed data for the years 1964 to 1977 shows the difference between placement of children for adoption and orders of adoption being made in the court – see Table 3.

Table 3. *Placements of children for adoption compared to adoption orders in WA 1964–1977*

Financial Year	Department placements	Private placements	**Total placements**	**Total adoption orders**	Ex-nuptial adoption orders
1963–64	98	-	-	448	-
1964–65	182	157	339	487	-
1965–66	247	232	479	561	-
1966–67	272	263	535	570	-
1967–68	299	235	534	611	551
1968–69	352	235	587	540	498
1969–70	380	**293 (peak)**	**673 (peak)**	703	650
1970–71	**499 (peak)**	165	664	301	271
1971–72	448	113	561	457	426
1972–73	342	91	433	717	630
1973–74	246	60	306	**783 (peak)**	**700 (peak)**
1974–75	209	53	262	528	454
1975–76	177	29	206	531	410
1976–77	146	19	165	497	348

[Sources: Department for Community Welfare, *Adoption Information and Procedures* (1978), attached to Department of Communities, email, 7 June 2024; Annual reports of Child Welfare Department 1927–1972; Annual reports of Department for Community Welfare 1972–1984]

Placement of children for adoption peaked in WA in 1970

2.56 These figures from the Department for Community Welfare show that the placement of all children for adoption peaked in WA in the year spanning from 1969 to 1970 at 673 children. This year also represents the peak of both privately arranged placements and adoption orders. (By comparison, in the 1970 calendar year there were 2,316 ex-nuptial births.)

2.57 The number of adoption orders made was above 700 in the financial years 1970, 1973 and 1974, and significantly lower in the interim years 1971 and 1972. It is possible that amendments to the *Adoption of Children Act 1896* that came into operation in 1970 had an impact on the speed with which a successful order could be obtained by applicants. These legislative changes are discussed in Chapter 3.

Adoptions included state wards and First Nations children

2.58 Data recorded for a few select years shows the background of the child being adopted, including if they were a state ward or a 'native child'. For example, in the year 1967–1968, adoption orders were made for 6 ex-nuptial state wards and 15 First Nations children.

The percentage of unmarried parents having children increased over last century

2.59 As the 20th century progressed, the data shows both that the WA population increased and that it became more and more common for parents to have children without being married - see Table 4.

Table 4. *Ex-nuptial births as a percentage of all births in WA*

Year	Ex-nuptial births
1940	3.6%
1950	3.66%
1960	5.44%
1970	10.71%
1980	13.75%
1990	23.57%
2000	34%
2010	37.5%
2020	40.68%

[Sources: Western Australian Year Books; Australian Bureau of Statistics (ABS), *Births, summary, by state*, 2023, (Data Explorer), accessed 25 June 2024]

2.60 The numbers of WA adoptions generally rose in proportion to the numbers of WA births up to the mid-1970s. One contributor explained the peak of adoptions Australia wide by saying that the early 1970s is when the post-war baby boomers were having children.

2.61 However, the WA birth *rate* peaked in 1952 at 25.7 per 1000; from this point onwards people had less babies.

2.62 The last section of Chapter 6 provides further perspective on numbers and trends relevant to forced adoption through the lens of the majority of unmarried women who kept their babies.

Intersections

Forced adoption intersected with other damaging historical practices

2.63 In WA last century, forced adoption intersected with the policies that led to the Stolen Generations.[59] 'Clean break' practices were employed to separate babies from their Aboriginal mothers at birth, and some Aboriginal children were subsequently adopted.[60] The manager of Yorgum Link-Up, an organisation that works with Aboriginal people in WA who were separated from their families, said:

> Over the last century, Western Australia had the highest number of forced removals of Aboriginal children to institutions, missions and foster homes. This included forced adoptions. This is well documented in The Healing Foundation Report. These forced removals were most often with non-Aboriginal families, to other regions intrastate, interstate and in some instances, they were taken overseas. It was not uncommon for Aboriginal children to have experienced physical, emotional, mental, and sexual abuse whilst in their adoptive families.[61]

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59 In response to petition 72 'Stolen Generations Compensation', the Committee wrote to the Minister for Aboriginal Affairs expressing its position on an inquiry and potential redress scheme for the Stolen Generations in WA – see letter dated 18 April 2024.

60 See Human Rights and Equal Opportunity Commission, *Bringing them home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families*, Commonwealth of Australia, May 1997, p 41: 'Adoption was another method of removing Indigenous children from their families. Mothers who had just given birth were coerced to relinquish their newborn babies.' This section relates to NSW and ACT.

61 C Augusston, Yorgum Link-Up Manager, Yorgum Healing Services, letter, 23 May 2024. The Healing Foundation noted that figures for the Stolen Generation do not capture children placed through adoptions (The Healing Foundation, *Make Healing Happen*, May 2021, p 18, accessed 23 May 2024) examples of which were received in evidence for this inquiry (see: Submission 148; Submission 148a). The experiences of Millicent documented in the

2.64 As indicated above, the forced adoption era also intersected with that of the 'Forgotten Australians' who were raised in state care, private institutions or both. Many mothers who gave evidence for this inquiry spent time in institutions before and after giving birth, and some mothers were themselves wards of the state. In the evidence before us, most babies spent time alone in public hospitals, private institutions or both. Some of the babies of unmarried women were never adopted. Some were state wards and were cared for in group homes or fostered. Some were adopted later in their childhoods.

WA section of the *Bringing them home* report (p 102) reads as an instance of forced adoption. The child of this Aboriginal mother was removed at birth in KEMH in 1962. Department files contain information on Aboriginal women birthing in 'native hospitals' such as Mogumber/Moore River Native Settlement, KEMH, and regional hospitals (for example, see Department of Native Affairs 1943/0271 - *King Edward Memorial Hospital - admission of native women*, accessed 9 April 2024).

CHAPTER 3
The legal framework of adoption

3.1 This chapter considers the legal framework for adoption, how it evolved over the course of the 20th century, and the intentions and understandings which underpinned this.

3.2 Adoption was first legislated in WA in 1896. Over the course of the century that followed, successive changes were made to that legal framework, including who could adopt, whose consent to an adoption was required, how and when that consent could be obtained, how the records of adopted people were affected by adoption, and the degree of investigation and reporting on those seeking to adopt.

3.3 The Parliament of WA made those changes with the intention of improving the law and responding to problems that had emerged or were at risk of occurring in the future. Many changes during the 20th century contributed to a legal environment that enabled the forced adoption practices that were seen in evidence.

The dawn of adoption legislation – 1896

3.4 WA was the first jurisdiction in the Commonwealth of Australia to pass legislation dealing with adoption, with the *Adoption of Children Act 1896* (WA) (Adoption of Children Act).

3.5 While it is clear from the evidence that adoptions occurred prior to the Adoption of Children Act,[62] there are very few records available relating to those adoptions, and no specific information regarding how (or by whom) they were arranged or carried out. The small amount of evidence available suggests that before the Act was implemented, adoptions were very informal affairs. There was no legal framework regarding the parties to an adoption, the legal relationships created or dissolved by adoptions, or requiring that adoptions be registered.

3.6 The initial Adoption of Children Act was quite brief. It provided for applications to adopt a child to be made to a judge of the Supreme Court.[63] The judge was to be satisfied that:

- the child was under the age of 15 years
- the person proposing to adopt the child was of good repute and a fit and proper person to have the care and custody of the child, and of sufficient ability to maintain and educate the child
- the welfare and interest of the child would be promoted by the adoption, and
- all consents required by the Act had been duly signed and filed.[64]

3.7 Consent was dealt with as follows:

- Where the child was over the age of 12, the judge needed to be satisfied that the child consented to the adoption.[65]
- The consent in writing of both parents was required, unless they were deceased or had deserted the child.[66]

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62 See paragraph 8.14 which refers to a historic record of an 'adoption' in 1895.

63 *Adoption of Children Act 1896* (WA) ss 3 and 4. The Supreme Court of Western Australia is the State's highest court.

64 *Adoption of Children Act 1896* (WA) s 5.

65 *Adoption of Children Act 1896* (WA) s 5.

66 *Adoption of Children Act 1896* (WA) s 5.

- If a child had been 'deserted', no consents were required.[67]

3.8 Once an order of adoption was made, an adopted child was legally the child of the adopting parents, and the adoptive parents became the legal parent of the child.[68] The legal relationship between the adopted child and their natural parents was terminated.[69] The only exception to this was that an adopted child could not acquire property from their adopting parent through a deed, will, or instrument, unless it was expressly stated that they were to do so. The adopted child also could not take property as an heir of the adopting parents. Instead, the adopted child retained the right to take property as heir or next of kin of their natural parents.[70]

3.9 Adoptions could also be varied, reversed, or discharged, at the discretion of any judge of the Supreme Court.[71]

3.10 The adoption would confer the surname of the adopting parent on the child, in addition to the 'proper name' of the child, which meant that adopted children retained the first name and surname that they had been given at birth.[72]

Restriction of records and removal of names – 1921

3.11 The first changes to central features of the Adoption of Children Act occurred through the *Adoption of Children Act Amendment Act 1921*. The result of these amendments was:

- The requirement for the child to be under the age of 15 was softened, by permitting adoptions where the child was over that age but had been cared for for more than 3 years by a person acting 'as an adopting parent' or otherwise *in loco parentis*.[73]
- The requirement for a child to retain their 'proper name' once adopted was removed, instead becoming an option for adopting parents.[74]
- Records for proceedings under the Adoption of Children Act were closed to public inspection except 'for some reasonable and proper purpose and with the sanction in writing of the Master'.[75]
- The Registrar of the Supreme Court was now to provide the adoption details to the Registrar for Births Deaths and Marriages, and the Registrar would enter the adoption order 'in the entry of the birth of the adopted child in the register of births'.[76]

3.12 The changes to retaining a child's 'proper name' and restriction of access to the adoption records were the first of many which increased the secrecy surrounding adoptions and introduced hurdles for those wishing to access records of adoptions that had occurred.

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67 *Adoption of Children Act 1896* (WA) s 6. A 'deserted child' was one who in the opinion of the judge had been deserted and had ceased to be cared for and maintained by its parents or guardian (or the mother if the child was illegitimate). The lack of expectation for fathers of illegitimate children to care for or maintain them is reflective of the time and was noted by the Committee.

68 *Adoption of Children Act 1896* (WA) ss 7 & 8.

69 *Adoption of Children Act 1896* (WA) s 8.

70 *Adoption of Children Act 1896* (WA) s 8.

71 *Adoption of Children Act 1896* (WA) s 9.

72 *Adoption of Children Act 1896* (WA) s 10.

73 *Adoption of Children Act Amendment Act 1921* (WA) s 2.

74 *Adoption of Children Act Amendment Act 1921* (WA) s 3.

75 *Adoption of Children Act Amendment Act 1921* (WA) s 4.

76 *Adoption of Children Act Amendment Act 1921* (WA) s 5.

3.13 Hansard records indicate that the desire to remove a child's proper name upon adoption was primarily the result of pressure from adopting parents:

> A number of parents anxious to adopt children have objected very strongly to the addition of the proper name of the child, and they are quite right in their objection. They point out that it is unnecessary. We have had parents who were anxious to adopt a child refusing because the proper name of the child had to be shown on the register.[77]

3.14 The reference to a child's proper name as an 'addition' at adoption in the commentary above is a reversal of the legal reality of adoption at that time. The child already had their 'proper name,' and the only addition which was made upon adoption was the adopted name.

3.15 The interests of adoptive parents were clearly a priority when considering these issues. This is unsurprising, given adoptive parents during this period were frequently persons of reasonable wealth and owners of land. Those influential figures were more likely to mix in the social circles of Members of Parliament, and Government, than parents or adopted children. It is also evident from Hansard that at least one judge, presumably involved in making adoption orders, had expressed a desire for this change to be made.[78]

3.16 Another consideration was the 'stigma' of being an illegitimate child, which might be inferred from the adoption itself, because most adopted children were illegitimate:

> In the case of illegitimate children it naturally follows that they have a stigma cast upon them in having registered the name which they bore at the time of birth. It is entirely unnecessary to retain this prevision in the Act whereby a stigma is placed upon the child adopted.[79]

3.17 The Hon Sir Edward Wittenoom referred to a 'fine institution' in Russia where children were 'taken in without any name, simply on a ticket. Just a number is exchanged.'[80]

3.18 The potential for this amendment to cause difficulty was only raised by 2 Members. The Hon A Stewart raised concern:

> There might be cases in which at some considerable distance of time the alteration of name would prove disadvantageous to the child.
>
> …
>
> There ought to be a certainty of tracing back the identity of the adopted child, in case at some future date this should be to the child's interest.[81]

3.19 The Hon J Holmes similarly questioned:

> is the possibility of loss of identity adequately guarded against? Within a few years of the adoption of a child, someone might turn up desirous of doing something in the child's interests.[82]

3.20 The immediate response to these concerns was:

> The identity of the Child will be preserved by the records in the Supreme Court. An adoption has to be made in the Supreme Cout before a judge. When the order for

77 Legislative Assembly, *Debates,* 1921, p 622.

78 Legislative Assembly, *Debates,* 1921, p 622.

79 Legislative Assembly, *Debates,* 1921, p 622.

80 Legislative Council, *Debates,* 1921, p 693.

81 Legislative Council, *Debates,* 1921, p 810.

82 Legislative Council, *Debates*, 1921, p 810.

> adoption is made, the natural name of the child and the adopting parent's name are recorded in the Court…[83]

3.21 A requirement for adoptions to be provided to the Registrar for Births Deaths and Marriage was then added in response to the concerns raised, with the intention that 'this will make the chain complete, and there will be no difficulty in tracing the child.'[84]

3.22 The Legislative Council also discussed closing the adoption record to the public. Discussion of that change, in relation to finding an adopted child who was entitled to an inheritance from their natural family, led to the following exchange:

> Hon J J Holmes: Jones cannot lose his identity by calling himself Smith.
>
> Hon Nicholson: No, but the child will cease to be called Jones and will be called Smith.
>
> Hon H Stewart: Will cease to be called Jones, but will not cease to be Jones, nevertheless.[85]

3.23 Despite the insistence that a child would not 'lose his identity' through a change of name, the passing of these amendments was the first step of many which, combined, had exactly that effect for many adopted persons. The impact of names and records on the sense of identity for those affected by adoption became entrenched. This is considered in Chapter 9.

3.24 Those former Members of Parliament expressed very different views about the proposal to introduce a barrier to accessing adoption records. Those views included that:

- The measure was necessary to prevent 'prying eyes' or 'foolish or malicious' persons from obtaining information,[86] and to 'protect the secret of a child's origin'.[87]
- If a child was 'brought up in good surroundings', there was 'no reason why secrecy should not be observed for all time regarding the child's antecedents'.[88]
- If searching records for births and deaths was permitted, tracing the adoption of a child should also be permitted.[89]
- Certain measures could result in significant legal expenses for those who were justified in accessing information.[90]
- The measure could prevent the (desirable) ability for others to 'inquire into the heredity of the child' including in relation to marriage.[91]

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83 Legislative Council, *Debates,* 1921, p 810.

84 Legislative Council, *Debates,* 1921, p 850.

85 Legislative Council, *Debates,* 1921, p 810.

86 Legislative Council, *Debates,* 1921, p 811.

87 Legislative Council, *Debates,* 1921, p 811.

88 Legislative Council, *Debates,* 1921, p 851. This appears to also relate to secrecy from the child themselves, noting earlier comments by the same Member that the child might become aware for the first time that they were adopted from a 'mischievous schoolmate'.

89 Legislative Council, *Debates*, 1921, p 811.

90 Legislative Council, *Debates*, 1921, p 811.

91 Legislative Council, *Debates*, 1921, p 811.

3.25 Comments throughout Hansard records in 1921 indicate that adoption rates were steeply climbing, that this was considered a good thing, and that further increases were desirable.[92] The financial benefit to the State of having children adopted was also made explicit:

> Last year there were 87 adoptions and, apart from the benefit to the children, that meant a saving to the State of £22,000.[93]

3.26 This appeared to be based upon the assumption that the only alternative to adoption was for a child to be a ward of the state, which would result in cost to the State for their institutionalisation. This assumption became clearer during debate of the 1926 amendments.

Erasing parents and continuing restriction of records – 1926

3.27 The *Adoption of Children Act Amendment Act 1926* continued the changes of 1921. As a result of these amendments, adopted parents could now apply for the adoption details to be inserted as a 'fresh' birth entry on the register, which would have the date and place of birth, the first name, the adopted surname, the details of the adopting parent, and a reference to the order of adoption.[94] This 'fresh' birth entry on the register had the effect of removing the details of an adopted child's parents from their birth certificate.

3.28 The procedure following this amendment was summarised in later debates in the Legislative Council:

> When the adoption of a child is finally approved by a judge of the Supreme Court in Western Australia, the Registrar-General's Department is advised and action is taken there to note the adoption on the child's original birth certificate, provided, of course, that the child is born in this State.
>
> In the event of the Registrar-General's Department receiving an application for a copy of the child's birth certificate, the department, on examining its records, observes the fact of the adoption and issues a certificate showing the child's adopted name and parentage and not the original details of his birth.[95]

3.29 As with the previous adoption records, access to the new record was restricted. It would not be open to inspection except with the approval of the Registrar of Births Deaths and Marriages (then called the Registrar General).[96]

3.30 As was the case with the 1921 changes, the intention of this amendment was to prevent persons from obtaining information about an adopted child:

> At present the birth of these children is registered, and any one on payment of 1s, can obtain a certificate of birth. That is not desirable either in the interests of the adopting parents or the child. Some evilly-disposed person, who bears animosity towards the adopting parents, may want to make mischief. He can secure a certificate of birth and put it up that the child is not the child of the adopting parents, but that its name is something else.[97]

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92 See for example: Legislative Assembly, *Debates*, 1921, p 622; Legislative Council, *Debates,* 1921, p 693; Legislative Council, *Debates,* 1921, p 852.

93 Legislative Council, *Debates,*1921, p 852.

94 *Adoption of Children Act Amendment Act 1926* (WA) s 2.

95 Legislative Council, *Debates,* 1945, p 2552.

96 *Adoption of Children Act Amendment Act 1926* (WA) s 2.

97 Legislative Council, *Debates,* 16 December 1926, p 3136.

3.31 The comments are also reflective of the views, and assumptions, made by Members of Parliament at the time of passing the laws. For example, the above comment by Hon A Lovekin was followed by comments regarding a child's natural family:

> The child may thus be subjected to vituperation and abuse on account, perhaps, of its illegitimacy.
>
> ...
>
> Many of these adopted children are illegitimate, and many of them are deserted. They have, however, found their way into good homes, and have a good upbringing as well as good home teaching. This is all to the benefit of the children as well as to the community as a whole. We should not open the door to the unfortunate position in which the children were originally placed, and to the stigma to be attached to them in after life.[98]

3.32 The financial benefit to the State was again noted:

> It is very much in the interests of the State that children should be adopted rather than that they should remain in institutions. One reason for this is that it is better for the child to live in a home, and secondly that this system saves enormous expense to the State. The secretary of the department say that the saving that will be effected on future maintenances is estimated at £11,000 in connection with adoptions already in force. If we were to make a calculation I think we would find that the savings were considerably above that sum. The average age at which a child would be on the State would he something like 10 years. As it costs between 9s and 12s 6d per child per week it will be seen that in the course of time, with this number of adoptions, a much greater saving than £11,000 would be effected.[99]

3.33 As with the 1921 debate, the above comment assumed the outcome was binary. In the eyes of the Members of Parliament, a child would either be adopted, or a State ward. There was no debate about how a mother might choose to keep or care for her child.

3.34 Hansard is a testament to views and values regarding 'family' at that time:

> The report also gives the class of houses and parents where these children are being placed. The first begins with parents whose income is £800 a year and, who have property, and the list goes down to parents with incomes of £130 a year and some property.[100]

3.35 From the Hansard commentary, it appears that the following views (and assumptions) were held by Members of Parliament at the time:

- An adopted child, if not adopted, would be a ward of the state which would increase the State's financial burden.
- Every child that was adopted was therefore a cost saving for the State.
- Increasing the number of adoptions increased the costs saved for the State and was therefore very desirable.
- Illegitimate children would be subjected to stigma due to their illegitimacy.
- Illegitimate children were saved from this stigma through adoption.
- Adopted children could be presumed to have been illegitimate.

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98 Legislative Council, *Debates,* 1926, p 3136

99 Legislative Council, *Debates,* 1926, p 3136.

100 Legislative Council, *Debates,* 1926, p 3136.

- It was therefore very desirable to prevent persons from discovering a child was an adopted child.
- Whether an adopted child was ever informed of their adoption, and under what circumstances, was a matter for the adoptive parents.
- Perceptions of whether a family would provide a good home for a child were closely tied to wealth and land ownership.
- Even following the amendments to the Adoption of Children Act, a person with a legitimate reason for seeking access to information about an adopted child's identity would be able to obtain those records without great difficulty.[101]

3.36 Significant amendments from 1921 and 1926 had a retroactive effect, which meant that the changes affected not only new adoptions, but also all previous adoptions. Those changes would not have been known to parents at the time of their children being adopted, but had a significant impact on their child's ability to identify and connect with them.

Expansion of regime and weakening of consents – from 1945

3.37 After the 1920s changes, the Adoption of Children Act was not amended significantly until the *Adoption of Children Act Amendment Act 1945*.

3.38 The intention of the 1945 amendments was to enable a reciprocal arrangement between Australia's states and territories, in which adoption in one state or territory would be recognised in another. This allowed for consistency and ensured that adoptive parents could obtain a birth certificate for an adopted child under their adopted name.[102] It also extended the operation of the previous restrictions of adoption records, so that these applied to adoptions of children born interstate, or born in WA and adopted interstate.[103] As with the previous amendments implementing restrictions, this was justified as a 'safeguard' or 'protection' for adopted children and their interests.[104]

3.39 In 1949, adoption law was amended further by the *Adoption of Children Act Amendment Act 1949*. The result of those changes was:

- The definition of a 'child' was changed from a boy or girl under the age of 15 years, to under 21 years.[105]
- When adopting a child, the adoptive parents could now choose to give the child a new 'Christian' name.[106]
- Following an adoption, the child was re-registered automatically, rather than that only occurring where it was applied for by the adoptive parents.[107]

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101 Legislative Council, *Debates,* 1926, p 3136.

102 Legislative Assembly, *Debates,* 1945, p 2379 ['We have had cases here where applications have been made for the issuance of a birth certificate under the adopted name; but, in the absence of the power proposed to be given by this Bill, the request had to be refused.'].

103 Legislative Assembly, *Debates,* 1945, p 2379 ['An application by a person subsequent for a copy of the birth certificate would cause an investigation to be made, and the Registrar-General would immediately see that the child had been adopted. He would therefore decline to furnish a copy of the original birth certificate.'].

104 Legislative Council, *Debates,* 1945, p 2552; Legislative Assembly, *Debates,* 1945, p 2379.

105 *Adoption of Children Act Amendment Act 1949* (WA) s 3(a). The definition of 'child' was changed because the Adoption of Children Act provided for the adoption of children both under and over the age of 15. As a result, it did not make sense for the Act to state 'children' were only those under the age of 15. As with the 1921 amendments, the involvement of the judiciary in this change is reflected in Hansard.

106 *Adoption of Children Act Amendment Act 1949* (WA) s 6.

107 *Adoption of Children Act Amendment Act 1949* (WA) s 8.

- Where the adopted child was over the age of 12, the judge no longer needed to be satisfied that the child consented to the adoption if the judge deemed there were 'special circumstances' or it was expedient to do so.[108]
- The court could now dispense with the consent of the 'putative' father of an ex-nuptial child.[109]
- The court could also now dispense with the consent of a parent or guardian where it was of the opinion that they were 'for any reason unfit to have the custody of the child' and that they had been given notice of the application.[110]

3.40 Prior to the 1949 amendments, adopted parents already had the ability to change their adopted child's 'Christian' (first) name. However, the adoptive parents would need to make a separate application under the Change of Names Act.[111] Records on Hansard indicate that this was already occurring quite frequently.[112] This change was only for the purpose of making that process less 'cumbersome' by allowing a judge to change the child's name when making an adoption order. Unlike earlier amendments regarding the surnames of adopted children, this change did not attract any significant debate.

3.41 The 're-registration' amendment also streamlined an existing process. At the time, adoptive parents could obtain an adoption order, but this was a separate matter to the registered details of a child. Once an adoption order was granted, the adoptive parents were able to apply for the Registrar General to 're-register' the child. That re-registration would then result in the details of the adoption being noted on the original birth record for the child, a new birth record being created with the adoptive parents listed (rather than the parents), and a birth certificate to match the new record.[113]

3.42 Following the amendment, adoptive parents no longer needed to make a separate application for the Registrar General to re-register the adopted child. Instead, upon making an order for adoption the Court would provide the Registrar General with the necessary details, and the Registrar General would automatically re-register the adopted child.

3.43 Three of the 1949 amendments related to consent. These introduced the ability for judges considering adoption applications to dispose of the requirement for consent from children over the age of 12, from the putative fathers of children, and from any parent or guardian. This provided broad discretionary power to judges determining applications.

3.44 While the 1929 amendments had provided freedom to adoptive parents to keep their child's adopted status secret, including from the child themselves, the discussion of a child's consent in 1949 indicated by that time it was not only common but socially acceptable for

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108 *Adoption of Children Act Amendment Act 1949* (WA) s 4(c)(9).

109 *Adoption of Children Act Amendment Act 1949* (WA) s 4(c)(7).

110 *Adoption of Children Act Amendment Act 1949* (WA) s 4(c)(8).

111 Legislative Assembly, *Debates,* 1949, p 697. ['Now I turn to a provision dealing with the re-registration of the birth and name of a child. Up to date the order of adoption confers the surname of the adopting parents on the child. But in many cases they desire to bestow a new Christian name, and this at present can be done only by order of the Attorney General under the Change of Names Act. This is a very cumbersome method in circumstances such as these, and it is therefore proposed that when the judge makes the order of adoption, he may make an order giving the child another Christian name.']

112 Legislative Council, *Debates,* 1949, p 1319. ['Members would he surprised to see the number of applications made to the Attorney General for the changing of the Christian names of adopted children. A great number of parents change the names of their adopted children and instead of going through the formality of applying to the Attorney General, it is proposed that this shall automatically be done at the time when the adoption order is obtained.']

113 Legislative Assembly, *Debates,* 1949, p 697.

adoptive parents to keep the child's adoption secret, even from the child themselves as they grew older.[114]

> There are many cases on record where a single woman has had an ex-nuptial child and later has married a man who is not the child's father. Usually the child grows up in the belief that the mother's husband is really his father and that he bears his surname. If the couple decided to adopt the child legally after the age of 12 years--many unfortunately put these things off for years before making up their minds-the child would have to be told of the facts and this, in some cases, would not be desirable. He would have to be told the circumstances in order to secure his consent to the adoption…[115]

3.45 The provision itself allowed the judge to dispense with the child's consent 'where in any special circumstances the judge deems it expedient to do so'. What qualified as a 'special circumstance' was not set out.

3.46 Prior to the 1949 amendments, the Act required the 'consent in writing of the parents'.[116] The 1949 amendments added power for a judge to dispense with the consent of 'the putative father of an ex-nuptial child'.[117] No other conditions were provided. It was enough to dispense with the father's consent if a child was ex-nuptial.

3.47 The discussion of this change referred to a father who had subsequently married and now had 'a family living in perfect domestic bliss':

> The arrival of communications under The Act, I am advised, has on more than one occasion broken up that domestic bliss, because the former relations of the husband have thus been brought to the notice of the wife. It is therefore desired to give the judge the power to dispense with the consent of a putative father if deemed wise to do so.[118]

3.48 This was the primary change which excluded fathers from the decision making and process regarding the adoption of their children. It is clear from Hansard that the motivation was to protect married men. The clear assumption was that these men would not wish to be involved in the care or support of their ex-nuptial child and would prefer to keep the secret of their 'relations' from their wife. The debates do not indicate any consideration of the impact that this change would have upon men who had fathered a child but had not married.

3.49 While the third change to consent applied to 'any parent or legal guardian', the debate regarding this change also centred upon fathers. The change inserted a discretion for the judge making an order for adoption to dispense with the consent of a parent or guardian where the judge was of the opinion that they were for any reason unfit to have the custody of the child. Those reasons could include 'badness of character', 'unsoundness of mind', or 'aversion or apathy towards the child'.[119] Unlike the change to consent from fathers of 'ex-nuptial' children, these other parents or guardians needed to be given notice of the application for adoption.

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114 Legislative Council, *Debates*, 1949, p 1319. ['I have not the slightest doubt that very few adopted children appreciate that they had been adopted]'; Legislative Council, *Debates*, 1949, p 1522. ['That has very wisely been modified because one can easily imagine circumstances where it is not in the interests of a child over the age of 12 years that he should be made aware of his illegitimacy']

115 Legislative Assembly, *Debates,* 1949, pp 696-697.

116 *Adoption of Children Act 1896* (WA) s 5(5).

117 *Adoption of Children Act Amendment Act 1949* (WA) s 4(c).

118 Legislative Assembly, *Debates,* 1949, p 696.

119 *Adoption of Children Act Amendment Act 1949* (WA) s 4(c).

3.50 When justifying the need for discretion to dispense with the consent of parents, a Minister provided an extreme scenario of a man sentenced to life imprisonment.

> From time to time applications to adopt children have been made, but could not be finalised because the necessary consent was not forthcoming from one of the child's parents. There are cases where the parent has done nothing for his child and has obviously no care for it, and yet has adopted a dog-in-the-manger attitude. I am informed that one of the most striking cases that has come under the notice of the Child Welfare Department is that of a man who is serving a sentence of imprisonment for the term of his natural life. His wife married again, and this man refuses to allow the wife and her present husband to adopt the child when obviously it would he for the benefit of the child that it should be adopted in the circumstances existing. However the father has steadfastly refused to allow his ex-wife and her second husband to adopt it.[120]

3.51 These comments indicate that fathers faced harmful attitudes even where married, because their very value as a father was conditional upon their ability to financially support their child and maintain standing in the community. Without those virtues, it was considered desirable for them to be stripped of their connection to their child so that another man could take up that position.

3.52 The amendments also inserted a new provision, which required a judge dispensing with consent to provide the reasons for the dispensation within the adoption order.[121] This provided some reassurance that the discretion to dispense with consent would be used carefully.

Increasing judicial discretion – 1953

3.53 In 1953, further amendments were made to the Adoption of Children Act through 2 amending acts.[122] These resulted in the following key changes:

- An order of adoption would only be made if either the applicant or the adopted child was domiciled in Western Australia.
- The ability to dispense with the consent of a child over the age of 12 years was broadened to include the ability to dispense with the consent in writing of the parents or guardian of the child.[123]
- The requirement for a judge making an order of adoption to state the reasons for dispensing with any consent and to set those reasons out in the order was removed.[124]
- Where an order of adoption was made and the child's birth was not registered in Western Australia, the Registrar General would now register the birth of the child when they received the adoption details.[125] Those adoption details included the date and place of birth of the child, their name upon adoption and the details of the adopting parents. These details did not include the names of the child's parents, nor the name given to them by their parents at birth.

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120 Legislative Assembly, *Debates,* 1949, p 696.

121 *Adoption of Children Act Amendment Act 1949* (WA) s 4(d).

122 The *Adoption of Children Act Amendment Act (No 1) 1953* (WA) and the *Adoption of Children Act Amendment Act (No 2) 1953* (WA).

123 *Adoption of Children Act Amendment Act (No 2) 1953* (WA) s 2(b).

124 *Adoption of Children Act Amendment Act 1949* (WA) s 4(d), *Adoption of Children Act Amendment Act (No 2) 1953* (WA) s 2.

125 *Adoption of Children Act Amendment Act (No 2) 1949* (WA) s 7.

3.54 This bill was initially introduced without the clauses affecting consent, with the intention only to enable reciprocal arrangements for adoption across WA and other parts of Australia. The clauses affecting consent were inserted during consideration of the bill after it had been introduced, upon the recommendation of 'one of the judges'.[126] Other comments suggest it was also at the request of the secretary of the Department.[127]

3.55 When moving that this clause be inserted, the then-Premier noted that it would provide judges with discretion not to require the consent of parents, which was necessary due to certain cases in which consent had been provided by one parent but not the other:

> Cases have occurred in which one of the natural parents has been willing to agree to the proposed adoption but the other has not. These instances have occurred in connection with divorce cases.[128]

3.56 The specific example provided in the Legislative Council was where a child could not be adopted by its mother and her second husband, because the first husband refused to consent. That husband was reportedly in England, did not maintain the child, and had been divorced for adultery.[129] This example was very similar to the example provided in discussion of the 1949 amendments.[130] There was no mention of the existing clause from the 1949 amendments when the 1953 amendments were discussed. It is not clear why the 1949 provision was not sufficient and additional discretion was required.

3.57 The practical significance of this change was that it included parents within the category of those whose consent could be dispensed with, in provisions that were initially introduced to deal with the consent of children. Where previously the consent of parents could be dispensed with, but only upon satisfying particular requirements, these amendments significantly broadened the discretion for a judge to dispense with their consent.

3.58 The removal of the requirement for judges to state the reasons for dispensing with any consent was 'asked for by the judiciary', who referred to the embarrassment for a judge in having to place on the order for adoption the reasons they had dispensed with consent.[131] It was noted that in practice, judges would put their reasons for exercising that discretion on the confidential file dealing with the application.[132] However, that file was confidential and was not readily available to anyone outside the Court, including parents who might question why their consent had been dispensed with.

3.59 The change to provide for registration of a child's birth following an adoption order was also subjected to very little debate. When putting that change to the Legislative Council, the Chief Secretary stated:

> If the child was born in a part of the British Commonwealth under which there was no reciprocal arrangement in regard to an exchange of adoption orders, then no birth certificate would be available in the adopted name. Proof of birth could then be established only by reference to the order of adoption, which would be most undesirable.[133]

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126 Legislative Assembly, *Debates,* 1953, p 2743.

127 Legislative Council, *Debates*, 1953, p 2287.

128 Legislative Assembly, *Debates,* 1953, p 2743.

129 Legislative Council, *Debates,* 1953, p 2289.

130 *Adoption of Children Act Amendment Act 1949* (WA); *Adoption of Children Act 1896* (WA) 1954 reprint s 5(8). The reasons included 'badness of character', unsoundness of mind, or aversion or apathy towards the child.

131 Legislative Council, *Debates,* 1953, p 2289.

132 Legislative Council, *Debates*, 1953, p 2289.

133 Legislative Council, *Debates,* 1953, p 2287.

3.60 However, this change did not just allow for registration of the birth of children born overseas and adopted. It also operated to allow for the registration of birth of a child who had been born in Western Australia, but whose birth had not been registered by the time of the adoption order concerning them. When discussing the 1949 amendments, it was suggested that there were many people whose births had not been registered and could benefit from these amendments.[134]

3.61 Until this change, many adopted children would have 2 birth certificates:

- the initial birth certificate with their name and the names of their parents, and
- the second (re-registered) birth certificate with their adopted name and the names of their adoptive parents.

3.62 However, children who were adopted under these new provisions, without having their birth already registered at the time of the adoption order, would only have the second birth certificate. No certificate of birth was ever produced with their name and the names of their parents.

3.63 The requirement for the Registrar General to approve inspection of records relating to adoption was also discussed. The commentary in 1953 indicated continuing secrecy regarding adoption, and concern for 'illegitimate' children:

- 'Everything is kept secret in the adoption of children.'[135]
- 'The parents adopting the child generally pass the child off as their own'.[136]
- 'An adopted child might be illegitimate, and it would be embarrassing if the documents relating to its birth could be inspected'.[137]

3.64 It was expected that the Registrar General would give permission to inspect an adopted child's records if a legitimate child was adopted at birth, and later became an heir to an estate. But that was 'the only circumstance' put forward for the inspection being permitted.[138]

Increased Departmental oversight – 1959

3.65 In 1959 there were further amendments made to the Adoption of Children Act. These included:

- Addition of a requirement for persons seeking an adoption order to provide a certificate from a medical practitioner confirming that they had undergone examination and were not suffering from infectious tuberculosis.[139]
- Addition of a requirement that the Department make a written report as to:
    - Whether the applicant for an adoption was of good repute and a fit and proper person to have the care and custody of the child and their ability to bring up, maintain and educate the child; and

134 Legislative Council, *Debates,* 1949, p 1526.

135 Legislative Council, *Debates,* 1953, p 2288.

136 Legislative Council, *Debates,* 1953, p 2288.

137 Legislative Council, *Debates,* 1953, p 2288.

138 Legislative Council, *Debates,* 1953, p 2288.

139 *Adoption of Children Act Amendment Act 1959* (WA) s 2.

- Such other matters concerning the applicant or the child as the judge determined.[140]

- Addition of a requirement that where a person intended to apply for an adoption order, they would notify the Director of the Department of their intention.[141]

3.66 Discussion of these amendments was notable not just because of the nature of the changes themselves, but also because of the comments made regarding adoption and the role of the Department.

3.67 The benefits of adoption at this point in time were considered to be 'twofold': 'the birth of the child concerned is reregistered showing him to be the son of his adopting parents', and; 'the adopting parents obtain a legal "title" to him through the judge's order when the application is granted'.[142]

3.68 The mention of legal "title" is notable because it indicates a recognition by the Minister for Child Welfare that adoption law treated adopted children in a manner resembling property.

3.69 The change regarding clearance by a medical practitioner was brought on due to 'a few cases brought to notice' in which children had been adopted by 'persons suffering from tuberculosis'.[143]

3.70 Discussion of this change included the comment that:

> We should not deny people the right of happiness if they feel this can be attained by adopting a child.[144]

3.71 The existing process of private and public adoptions, and in particular the role of the Department in each, was set out:

> The practice in the past has been to investigate and report on those persons who apply to the Department for a child to be placed with them for adoption. If the reports were satisfactory, the applicants were approved and, in due course, a child was placed with them. In private cases – i.e., cases where applicants acquire a child through a doctor or hospital, and a solicitor handles the legal work – the Supreme Court referred the matter to the Department to ascertain whether the applicants and/or the mother of the child were known to the department. The department informed the court in accordance with its knowledge or lack of record of the parties concerned, but did not carry out any investigation unless specifically asked to do so by the judge.[145]

3.72 The Minister for Child Welfare then noted the 'main trouble' with such a (private) arrangement:

> The child is already in the possession of the applicants when the Department is asked to report to the court. On odd occasions, the judges have refused to grant orders of adoption in private cases when departmental information has been made available to them.[146]

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140 *Adoption of Children Act Amendment Act 1959* (WA) s 2.

141 *Adoption of Children Act Amendment Act 1959* (WA) s 3.

142 Legislative Council, *Debates,* 1959, p 2101.

143 Legislative Council, *Debates,* 1959, p 2101.

144 Legislative Council, *Debates,* 1959, p 2153.

145 Legislative Council, *Debates,* 1959, p 2101.

146 Legislative Council, *Debates,* 1959, p 2101.

3.73 The requirement to notify the Department was an extension of the new requirement for a departmental report in every adoption application. The intention was that if an applicant was required to notify the Department 30 days before applying for an adoption order, the Department would then have the opportunity to investigate and recommend (or not recommend) the applicants. While an applicant who had not been recommended by the Department (in the Department's report) could still make an application for an order of adoption, it would be at the judge's discretion whether to grant that order, with the report before the judge for their consideration. The intention was that the effect of this would be that the private agency would then decline to place a child with the prospective adoptive parents.[147]

3.74 The immediate issues with this were:

- It assumed that a 'private agency' arranging adoptions held the same values and priorities as the Department. In doing so it assumed that private agencies would hold the suitability of prospective adoptive parents as a paramount, or at least significant, consideration. This was ignorant of the reality that these private agencies operated in the private sphere rather than the public sphere and would be expected to have different priorities as a result.
- It failed to acknowledge that private agencies provided adoption arrangement services to prospective parents including those who had been turned away by the Department, presumably because they were not considered suitable for adoption.
- It failed to fully acknowledge or address the reality that, in many cases, children were being placed with prospective adoptive parents well before any application for adoption was being made. It therefore did not directly resolve the 'trouble' of a child being 'in the possession of the applicants' when the Department was asked to report to the Court.

3.75 The process of applications was also discussed from the perspective of a lawyer:

> If ever I have been proud of the operation of any law, it is the Act relating to the adoption of children.
>
> …
>
> Indeed, before an application comes before the judge, many requirements have to be fulfilled, particularly with respect to the character, the antecedents, and the suitability of the persons proposing to adopt a child.
>
> For instance, it has to be established that those persons are of good character. If they have been convicted of any offences the details have to be submitted to the court. Character references have to be obtained from people of standing in the community. The standard of the housing accommodation into which the child is to be taken has to be shown. The occupation, as well as the financial position of the husband and wife adopting the child, has to be set out… [148]

3.76 Another Legislative Council Member noted medical certificates were not required by the existing act, and referred to issues of adoption being granted where adoptive parents were of poor health:

> recently a nearby neighbour adopted a child; and I am sure that at the time her health must have been below the standard which I think should be required in these circumstances. Within a month or two of the adoption of this child, the

147 Legislative Council, *Debates,* 1959, p 2101.

148 Legislative Council, *Debates,* 1959, p 2227.

> woman was confined to her bed, and a small girl of school age had to be the mother of the adopted child whilst the father was at work.
>
> …
>
> In my opinion, that woman should never have been allowed to adopt a child.[149]

3.77 That Member then proceeded to comment upon the officers from the Department:

> I think that at times some…may not be trained sufficiently to be able to use proper judgment in these cases. We are getting some very young men now between the age of 20 and 25 in the department. They have little knowledge of fatherhood or of life generally; and I think that persons in these positions should be around the age of 35 to 40 with a knowledge of family life.
>
> A few years ago there was living within two doors of me a person who adopted a child. I do not know how anyone could have given a recommendation for this adoption.
>
> …
>
> As I was saying, this child was put in a closed cot while the mother was out all day. The child screamed its eyes out; and reports were made by the local people, and after some time the child was taken away.
>
> …
>
> I think that at times certain members of the Child Welfare Department are either lackadaisical or have insufficient knowledge.
>
> …
>
> I do believe that in the Child Welfare Department we should have men who have undergone vast training to gain certificates in family life to enable them to take on the responsible duties in regard to these adoptions. There have been some awful cases of adoptions…[150]

3.78 Concern was raised that the departmental report was 'taking away some of the responsibility of the judge' and was 'simply allowing the information to be acquired by the department and presented to the judge'.[151]

3.79 It was also noted that an individual could be 'incriminating himself' if they provided evidence to the Department that rendered them unsuitable for adoption.

3.80 As a result, the suggestion was that 'if it is essential that the Child Welfare Department act in this manner, it simply means that the final matter for the judge to decide upon is based upon the written evidence of the department, because the report will cover what the judge now has to inquire into under the Act as it stands'.[152]

3.81 One Member raised concern that conditions might be made too stringent:

> The conditions of adoption should not be such as would frighten a prospective applicant from applying to adopt a child.

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149 Legislative Council, *Debates,* 1959, p 2228.

150 Legislative Council, *Debates,* 1959, p 2228.

151 Legislative Council, *Debates,* 1959, p 2230.

152 Legislative Council, *Debates,* 1959, p 2230.

> Let us consider those children who are available for adoption. Generally they are unwanted by their parents, or the parents are such that they will not give them the love and affection which every child wants. If these children are not adopted, they are condemned to life in an institution during the whole of their youthful days.
>
> Now let us consider those who desire to adopt children. I suppose that only one out of 10 would be unsuitable to look after a child; the other nine out of 10 would be people who love children. Generally speaking they have none of their own, and long to lavish their care and affection on some child. A child who comes under the care of such people is fortunate indeed.[153]

3.82 This concern was responded to by another Member, who noted that they did not have to worry about a shortage of adoptive parents causing children not to be adopted and to be homeless, because 'there are not enough children now to fill the applications that we have for them. There is a tremendous waiting list; and we could do with another 200 babies a year to comply with the applications.'[154]

3.83 One member noted his niece had waited 4 years, and it was noted that others had to wait 5 and 6 years, while others 'get them reasonably quickly'.[155]

3.84 Hon L A Logan noted that it had been suggested to him that 'all adoptions should be undertaken by the Child Welfare Department'. However, this option was not explored further or pursued by any Members during debate of the bill.

Growing awareness of child rights – 1959

3.85 Another Member in 1959 also expressed some concern about the officers from the Department:

> officers of the Child Welfare Department should be carefully selected. I have seen district officers of the department, and I have been amazed at their immaturity. In my opinion people so young have not acquired the necessary experience and maturity to enable them to undertake child welfare work, or to be able to understand the question of adoption.[156]

3.86 Comments by the Hon J G Hislop focused briefly upon the child:

> we are not justified in asking a young child who is free from tuberculosis, and who probably has no background history of the disease in his family, to spend the susceptible years of his life in a house where there is infectious tuberculosis. I think we have reached the stage where we can say that we are not justified in asking a small child to take that risk.[157]

3.87 A further reminder of duty to the child was noted by another Member during discussion of the bill:

> We must appreciate that we are dealing not only with people who are desirous of adopting a child, but with the child itself. As responsible members of society we have a duty to the child, just as much as to the couple who wish to adopt that

153 Legislative Council, *Debates,* 1959, pp 2230-2231.

154 Legislative Council, *Debates,* 1959, p 2232.

155 Legislative Council, *Debates,* 1959, p 2232.

156 Legislative Council, *Debates,* 1959, p 2231.

157 Legislative Council, *Debates,* 1959, p 2229.

child; and if we are to show bias one way or the other, I think our preference should lie with the child…[158]

3.88 The above comments in 1959 were the first to focus upon the interests of an adopted child as an individual, distinct from the interests of adoptive parents or the wider community. This was a significant shift from the attitude in previous discussions. Changing attitudes between the 1953 and 1959 amendments may have been related to the establishment of the United Nations in 1945, with Australia one of the 51 founding members. The United Nations adopted the Declaration on the Rights of the Child one month later, but whether any debate on child rights occurred around that time is not recorded.

Adoption statistics – 1959

3.89 Figures for adoptions were provided during the above debates as follows:

- From 1956 to 1959 there were 277 applications granted. Of those, 50 were granted by the Department, and 227 arranged by solicitors.
- From 1 July 1957 to 30 June 1958, there were 190 applications granted for adoption. Of those, 85 were arranged by the Department, and 205 arranged by solicitors.
- Numbers of applicants were increasing.
- From 1958 to 1959, there were 316 applications granted. Of those, 89 were arranged by the Department, and 227 by solicitors.[159]
- Of the 89 children placed by the Department from 1958 to 1959, 45 were placed with approved applicants. This included 4 children adopted by relatives, 17 ex-nuptial children adopted by the mother and her husband, 3 children of former marriages adopted by the mother and her husband, 15 wards of the department, 2 migrant children, one foster child, and 2 legitimate babies.[160] These figures only provide for 44 of the 89 children. The debate does not make clear whether the remaining 45 children were all ex-nuptial non-relative placements.

A national model – 1960s

3.90 In late 1960, the prospect of model legislation for adoption was explored between the Australian and State governments. A meeting of Attorneys-General took place in March 1961. Meetings of child welfare officers also took place to debate the social welfare aspects of the bill.

3.91 The processes and discussions are explored in the Senate report, and likely impacted the development of legislation for adoption in Western Australia. In particular, the Senate report notes that the Under Secretary of Child Welfare in New South Wales provided notes on principles and practice of adoption in New South Wales, which raised many issues. As noted by the Senate report, while the concerns raised by this paper are not necessarily representative of those of all states, 'it is likely from subsequent agreement of child welfare officers that several of his concerns were echoed in other jurisdictions'.[161]

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158 Legislative Council, *Debates,* 1959, p 2231

159 Legislative Council, *Debates,* 1959, p 2232.

160 Legislative Council, *Debates*, 1959, p 2232.

161 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, p 145.

3.92 In 1962, a small amendment was made to the Adoption of Children Act, to extend the exemption of adopted children from receiving property from their adopted family. This was broadened to include the children of the adopted child.[162]

3.93 In 1964, multiple amendments were made which changed the operation of the law significantly. These changes included:

- Sections 4A to 4I were inserted, which set out:
  - consent requirements for an order of adoption[163]
  - consent to an adoption generally, rather than consent to an adoption by a specific person[164]
  - recognition of consents given in other States or Territories[165]
  - revocation of consents[166]
  - prescribed forms for consent[167]
  - that judges were to refuse to make an order of adoption in reliance on a consent under certain circumstances[168]
  - new provisions for dispensing with consent[169]
  - where the required consents had been given or dispensed with by the court, the Director of the Department became the child's guardian until an adoption order was made.[170]
- Section 5 was amended to:
  - remove the provisions for required consents, which were now set out within another section[171]
  - reframe the power to dispense with consent from a child over the age of 12[172]
  - set out more specific matters for the Department to consider when making their report for the Court.[173]
- A section was added to recognise orders of adoption made in other States or Territories,[174] and in other countries.[175]
- Introduction of the following offences under the Adoption of Children Act:

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162 *Adoption of Children Act Amendment Act 1962* (WA) s 2.

163 *Adoption of Children Act Amendment Act 1964* (WA) s 4.

164 *Adoption of Children Act Amendment Act 1964* (WA) s 5.

165 *Adoption of Children Act Amendment Act 1964* (WA) s 6.

166 *Adoption of Children Act Amendment Act 1964* (WA) s 7.

167 *Adoption of Children Act Amendment Act 1964* (WA) s 8.

168 *Adoption of Children Act Amendment Act 1964* (WA) s 9.

169 *Adoption of Children Act Amendment Act 1964* (WA) s 10.

170 *Adoption of Children Act Amendment Act 1964* (WA) s 11.

171 *Adoption of Children Act Amendment Act 1964* (WA) s 13(b).

172 *Adoption of Children Act Amendment Act 1964* (WA) s 13(a).

173 *Adoption of Children Act Amendment Act 1964* (WA) s 13(c).

174 *Adoption of Children Act Amendment Act 1964* (WA) s 16.

175 *Adoption of Children Act Amendment Act 1964* (WA) ss 17, 18.

- Payments or rewards for adoption, consent, transfer of possession or custody of a child, or for making arrangements with a view to the adoption of a child.[176]
- Advertising or indicating a parent or guardian wished to have a child adopted, or a person wished to adopt a child, or a person was willing to make arrangements with a view to the adoption of a child.[177]
- Publishing or bringing to notice the name of an applicant, child, father, mother, or guardian, or any matter likely to enable them to be identified.[178]
- Using or threatening to use force to the mother of a child with a view to inducing her to offer or refrain from offering the child for adoption.[179]
- Transferring the custody of a child to another person with a view to the adoption of the child unless that person had provided the Director of Child Welfare Services with a certificate confirming the child had been examined and was in good health, or specifying the condition that the child was suffering.[180]
- Transferring the custody or control of a child to another person with a view to the adoption of the child, without the written permission of the Director of Child Welfare Services.[181]

3.94 Consideration of the needs of an adopted child was evident relating to the 1959 amendments. The debate of the 1964 amendments indicates that sentiment continued to change over the intervening 5-year period, with consideration of an adopted child's welfare now one of the priorities:

> Adoption must be viewed from two complementary points of view. First of all it is a means by which married persons to whom nature denies parenthood may become the true parents of a family. Secondly, it is the means by which those children to whom social conditions deny the natural heritage of mother and father shall have given to them a new mother and father for their life-times.[182]

3.95 At other points in the debate, the child was referred to as the 'No. 1 priority'. However, this was then immediately followed by reference to the adoptive parents and their interests:

> In this type of legislation we are endeavouring to place the child first. We believe it is the No. 1 priority. However, we are not forgetting the rightful role of those people who want to adopt a child.[183]

3.96 The overall approach to adoption had also moved towards being more socially informed:

> the law governing adoptions should not only have in mind the legalities concerned but also the humanities involved.[184]

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176 *Adoption of Children Act Amendment Act 1964* (WA) s 20.

177 *Adoption of Children Act Amendment Act 1964* (WA) s 21.

178 *Adoption of Children Act Amendment Act 1964* (WA) s 22.

179 *Adoption of Children Act Amendment Act 1964* (WA) s 23.

180 *Adoption of Children Act Amendment Act 1964* (WA) s 24.

181 *Adoption of Children Act Amendment Act 1964* (WA) s 25.

182 Legislative Council, *Debates*, 1964, pp 2375-6.

183 Legislative Council, *Debates*, 1964, p 2630.

184 Legislative Council, *Debates*, 1964, p 2376.

3.97 The potential for harm, not only to the adopting parents, but also to other parties in an adoption, was also considered:

> The law should also safeguard the parties to adoption from those abuses to which all emotionally charged situations are open.[185]

3.98 The amendments were recognised as increasing the responsibilities of the Director of Child Welfare:

> to inspect, investigate, and inform the court as to the conditions under which an adopted child may live in his new home.[186]

3.99 The amendments were intended to address potential 'abuses' which had been seen in other cities, and could develop in Perth:

> To safeguard the freedom of all those groups of person at present concerned in adoptions to continue their good work without unnecessary bureaucratic interference, but at the same time to provide safeguards against abuses which have become apparent in more populous centres, and which with our increasing population may develop here.[187]

3.100 The purposes of the amendment bill were:

> (1) To improve the present Western Australian Adoption of Children Act by provisions to safeguard both the welfare of children who are the subjects of adoption, and the rights of those persons who adopt them.
>
> (2) To establish a legal foundation on which the Australia-wide recognition of orders made in the various States can be based.[188]

3.101 While the purposes of the Bill had a new attention to the interests of adopted children, it continued the long-standing silence regarding the rights and welfare of mothers, and parents more broadly.

Updated consent – 1964

3.102 The 1964 amendments introduced a requirement that a consent from a mother was not to be given within 7 days of the birth of her child. However, this could be overcome by a certificate from a medical practitioner or midwifery nurse confirming that at the time of signing the consent, the mother was in a fit condition to give that consent.[189] Debate of this change indicated an intention that it would act as a 'safeguard' for the mother, to allow her 'to return to a normal state of mind after the child is born'.[190] However these comments failed to acknowledge the ability for medical practitioners or midwifery nurses to certify consent within that 7 day period. It does not appear that Members of Parliament expected that exception to be used as frequently as it later was.

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185 Legislative Council, *Debates*, 1964, p 2376.

186 Legislative Council, *Debates*, 1964, p 2376.

187 Legislative Council, *Debates*, 1964, p 2376.

188 Legislative Council, *Debates*, 1964, p 2376.

189 *Adoption of Children Act Amendment Act 1964* (WA) s 9.

190 Legislative Assembly, *Debates*, 1964, p 3000: 'Another important clause will give the mother certain safeguards as to when she will give consent to the adoption of a new-born babe. The mother shall be given seven days after the birth of her child to make a decision on whether she wants the child adopted. This period is to allow her to return to a normal state of mind after the child is born. However, even though she makes her decision after seven days, she still has the right to withdraw her consent for the adoption for a period of thirty days.'

3.103 At the time of these changes, the consent of a putative father of an ex-nuptial child could be disposed of by a judge considering the application for an adoption order. There were no requirements around the exercise of this power, which made it quite broad. The amendments completely removed any requirement for a putative father to consent, so that he would 'have no voice in consent'[191] and would 'not figure in the picture at all'.[192] This was because it was considered that the father's 'interest and rights in the child' were 'practically nil'.[193]

3.104 The Committee notes that this assumption was incorrect. The evidence demonstrates the willingness and desire of some fathers to be involved with and to raise their child.

3.105 The 1964 amendments also introduced a specific provision for revocation of consent by a mother. This meant that a mother could revoke her consent within 30 days of signing the consent. The revocation had to be by written notice served on the Director of Child Welfare.

3.106 Prior to these amendments, mothers were legally able to revoke consent at any time before the adoption order had been made.[194] The 1964 change was not intended to benefit mothers, but rather the couples hoping to adopt a child who were 'apprehensive' that the mother may revoke her consent during a 'long sustained period of uncertainty'.[195]

3.107 The discussion of these amendments to revocation indicate a belief that, not just in law but in practice, where a mother wished to revoke consent to an adoption, this would (and should) occur:

> If the parent is genuine, the parent would get the children back – and I think it is fair enough that they should. There is an advantage with children being with their natural parents, after all is said and done.[196]

3.108 Despite this belief, the Committee did not receive evidence of any revocation by a mother being accepted and actioned by the Department between 1920 and 1990.[197] The only lived experience evidence received related to an attempted revocation that was unsuccessful (see Chapter 6).

Offences under the Adoption of Children Act – 1964

3.109 When introducing the 1964 amendments, a new clause prohibiting coercion of mothers was described as ensuring:

> That the natural mother of a child is protected from coercion by the putative father, her own parents, or any other person, to place the child in adoption.[198]

3.110 This suggests that the greatest risk of coercion came from the father, or the mother's parents. The Committee is aware from the submissions that this was sometimes the case. However, the evidence revealed the greatest coercion experienced by mothers came from outside the family. While later discussion referred to influence from persons wishing to adopt

191 Legislative Council, *Debates*, 1964, p 2377.

192 Legislative Council, *Debates*, 1964, p 2528.

193 Legislative Council, *Debates*, 1964, p 2528.

194 However, the Committee notes that despite this legal power, no evidence was received of any revocation by a mother being accepted or actioned by the Department for Child Welfare between 1920 and 1980.

195 Legislative Council, *Debates*, 1964, p 2378.

196 Legislative Council, *Debates*, 1964, p 2628.

197 See Department of Communities, email, 7 June 2024, p 7.

198 Legislative Council, *Debates*, 1964, p 2377.

a child,[199] there was no mention of potential influence from others who came into contact with the mother.

3.111 Prior to the amendments, a child could be placed with prospective adoptive parents well before any application for an order of adoption was made, and (as a result) before they had been assessed by the Department. The 1964 amendments recognised that this was 'obviously bad welfare practice, for the child may have remained in an unsuitable home for a very long period'.[200] This had been discussed in 1959, and changes had been made to discourage it, which evidently proved ineffective. The 1964 amendments made it an offence to place a child without the written consent of the Director of Child Welfare.

3.112 It was hoped that this would prevent the placement of children with prospective adoptive parents who were not suitable. During debate, Members of Parliament indicated an awareness that some adoptions had been granted to those who were not suitable:

> I know of a person who adopted one child. That child is pretty big now. The person concerned lived near me and I never saw such treatment of a child. I would not let those people look after my dog. It is amazing how people are able to get these children and mete out the treatment they do.
>
> …
>
> The house was an eyesore and the people a worry to the neighbours. We were glad when they shifted out.
>
> …
>
> I know some instances where, when the children come home from school, they have to get their own meals because their mothers and fathers are at the pub. I am speaking of people who are earning big money. In one of the cases I know well, the parents are receiving £80 or £100 per fortnight, and it is all going into the hotels…[201]

3.113 It was intended that through the amendments, 'some of the loopholes' would be closed, to reduce the placement of children, or their adoption, by unsuitable persons.[202]

3.114 It was also acknowledged that children were 'sold' in other parts of Australia and the world.[203] Penalties for advertising in relation to the adoption of a child were intended to address 'unscrupulous people in the community who trade on those who wish to have children and are unable to do so'.[204]

Adoption statistics – 1964

3.115 Discussion of the amendments also provided updated figures for adoption. In 1963, 448 adoption orders were granted. Of those, 157 had been arranged by the Department, and the other 291 arranged privately by solicitors.[205]

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199 Legislative Council, *Debates*, 1964, p 2380.

200 Legislative Council, *Debates*, 1964, p 2380.

201 Legislative Council, *Debates*, 1964, p 2629.

202 Legislative Council, *Debates*, 1964, p 2631.

203 Legislative Council, *Debates*, 1964, p 2529.

204 Legislative Assembly, *Debates*, 1964, p 3000.

205 Legislative Council, *Debates*, 1964, p 2376.

3.116 Parliamentary debate indicated those seeking children still far outnumbered the children to be adopted.[206]

3.117 The number of ex-nuptial births in the state had been progressively increasing, from 5.62% of all births in 1961 to 7.11% of all births in 1963.[207]

3.118 The state of the Department was discussed, and appeared to have improved significantly since 1959:

> In the Child Welfare Department we have men –and I say this after working with them for some years – of education and with a knowledge of psychology; and they are able to judge things calmly, and are intelligent enough to see that a child gets the best deal possible.[208]

3.119 The debate also turned to the use of persons who were neither child welfare officers nor public employees, but underwent training and performed some of the roles of child welfare officers:

> …we have men and women who of their own accord, and for two nights over six months of the year, attend for training in child welfare work; and, at the end of that period, they are given an examination and, if selected by the department, they are given honorary work looking after, or taking control of, some of these problem children.
>
> These people do this work in their own time and they do work which the welfare officers have not got sufficient time to do.[209]

Changing community attitudes – 1964

3.120 Parliamentary debate also reflected changing community attitudes towards ex-nuptial children. It was clear a transition was underway:

> It is only now that we are breaking down the attitude that existed to children who were born illegitimate. It makes no difference to humanity whether a child is born in wedlock, or is illegitimate. A child is a child and has its own personality to develop; and it is just a matter of luck whether it has good parents or otherwise, or whether it is an adopted child.[210]

3.121 During debate it was suggested that the number of illegitimate children being adopted could be reduced by providing unmarried mothers with 'better conditions and more remuneration', and the 'truly motherly love' could be preserved.[211] At the time, an unmarried mother with one child received a total of £7 2s 6d per week in government support.[212]

3.122 The attitude towards informing adopted children that they had been adopted was also shifting. While previous commentary indicated a broad acceptance that many parents would never tell their adopted child that they had been adopted, this no longer seemed to be the assumption, and one Member expressed a strong view that it should be the opposite:

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206 Legislative Council, *Debates*, 1964, p 2528; Legislative Council, *Debates,* 1964, p 2630.

207 Legislative Assembly, *Debates*, 1964, p 3001.

208 Legislative Council, *Debates*, 1964, p 2625.

209 Legislative Council, *Debates*, 1964, p 2631.

210 Legislative Council, *Debates*, 1964, p 2625.

211 Legislative Assembly, *Debates*, 1964, p 3001.

212 Legislative Assembly, *Debates*, 1964, p 3001. This included a 'Social Services' payment and a 'Child Welfare' payment. Support payments available to unmarried pregnant women and mothers of ex-nuptial children are considered at paragraph 4.48.

> [The child] should be informed soon after reaching the age of understanding that it is an adopted child.
>
> ...
>
> Such news does not make any difference to a family. They continue to be just as happy.
>
> ...
>
> It will eventually be found out, and the longer the child is denied the information the worse will its reaction be.
>
> ...
>
> Adopted children should know as soon as possible that they are adopted.[213]

3.123 The debate also includes comments on adoption being available only to a married couple, and not to a de facto couple, indicating a greater move towards recognising and validating unmarried relationships.[214]

Delayed commencement and the Adoption of Children Rules – 1970

3.124 As considered above, the 1964 amendments made many significant changes to adoption law. However, those amendments did not commence operation *until 1970*.[215] It appears to the Committee that there was no urgency to implement these changes. In the intervening period, the issues that the amendments were designed to address continued.

3.125 Together with the new amendments, a new set of Rules were made in 1970.[216] The Rules set out the procedural framework underpinning the Adoption of Children Act. The original Rules had been made in 1899[217] and amended in 1930[218] and 1947.[219] The new Rules specified:

- Consents would be completed as one original and one copy. The person giving consent would keep the copy for their use, if they later wished to revoke consent.
- The Director was to acknowledge receipt of any revocation of consent.
- Where an application was made to dispense with a consent, the applicant was to include it on their application, and was to file an affidavit (or multiple affidavits) addressing the matters relevant to dispensation of consent.
- Specific documents were to be filed with an application for adoption.
- The Director of the Department was to be served with the application after it was filed with the Court. The Director would then file documents relevant to the application, including a police report on the applicant and their own report on the applicant.

3.126 The requirements for certain documents to be filed with applications for adoption orders were quite specific and provided for a variety of circumstances. Some notable requirements were:

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213 Legislative Council, *Debates*, 1964, p 2630. See also Legislative Assembly *Debates,* 1964, p 3003.

214 Legislative Assembly, *Debates*, 1964, p 3003.

215 The Committee was unable to find any explanation for the delay.

216 Western Australia, *Government Gazette,* No 33, 6 April 1970, p 959.

217 Western Australia, *Government Gazette,* No 29, 30 June 1899, p 1871.

218 Western Australia, *Government Gazette,* No 60, 19 December 1930, p 2665.

219 Western Australia, *Government Gazette,* No 50, 24 October 1947, p 1945.

- Affidavits by 2 or more persons of 'some standing in the community' swearing as to the good repute of each applicant.
- Affidavits by each applicant regarding a range of matters.
- Where a person giving consent (usually a parent) was under the age of 21, an affidavit from their parent, guardian or near relative would be required. This affidavit needed to confirm whether they agreed to an order of adoption, whether or not they understood the effect of an order of adoption, and whether the effect of an order of adoption had been explained to the person giving consent. This affidavit could be substituted in specific circumstances, if an affidavit could not be obtained.

Erosion of responsibility and accountability – from 1971

3.127 The *Adoption of Children Act Amendment Act 1971* introduced new changes to adoption law. The most relevant of these amendments were:

- The judge no longer needed to be satisfied that the person proposing to adopt was 'of good repute and a fit and proper person to have the care and custody thereof, and of sufficient ability to bring up, maintain and educate the child'. Instead, the judge needed to be satisfied that in the opinion of the Director, the applicant was a proper person. The opinion of the Director that a person was a proper person to adoption a child was 'conclusive evidence to that effect'. Or, the judge could also be satisfied that notwithstanding the opinion of the Director to the contrary, the applicant was such a proper person.
- Eligibility to apply for adoption was updated and set out within a new section. The only way to obtain a joint order of adoption was in the names of husband and wife. If married, a person could not apply for an order of adoption in their sole name, except with the consent in writing of their spouse.[220]
- The Act now distinguished between children who were 18 years of age, and those who were younger. Consent of parents was no longer required if an order of adoption was sought for a child over the age of 18 years.[221]
- Notice of revocation of consent could now be served not only on the Director of Child Welfare, but on another officer of the Department authorised by the Director to accept service of such a notice.[222]
- The Director of Child Welfare could now extend benefits to a child between consent for adoption being signed and an adoption order being made, as if the child was a ward of the state.[223]
- Removing a child from the State when the Director of Child Welfare was the guardian (for example, between the signing of a consent for adoption and the adoption order being made) was an offence.[224]
- If the Director was the guardian for a child but was of the view that it was not possible or desirable to place the child with anyone for adoption, or that the welfare and interest of the child would not be promoted by adoption, the Director could effectively revoke the adoption process and return the child to the child's parent or guardian.

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220 *Adoption of Children Act Amendment Act 1971* (WA) s 5.

221 *Adoption of Children Act Amendment Act 1971* (WA) s 6.

222 *Adoption of Children Act Amendment Act 1971* (WA) s 9.

223 *Adoption of Children Act Amendment Act 1971* (WA) s 10.

224 *Adoption of Children Act Amendment Act 1971* (WA) s 10.

- It was clarified that even though the Director was the guardian of a child, this did not affect the liability of any other person to provide adequate means of support for the child. Where the Director extended benefits to a child, it could seek to recover those costs from any parent or guardian.
- Where the Director remained a guardian for more than one year, the Director could apply to a judge for orders for the care and control of the child.
- Where the Director was a guardian for a child, the Director was able to place a child in the care of any suitable person who had agreed to have the child in their care.
- The requirement for medical examination for adopting parents was removed.
- A large amount of information required in the Department's report on prospective adoptive parents was removed. Instead, the report now needed to cover matters referred to in subsections 2 and 3. Those matters included the age of the child, that the Director was or was not satisfied that the applicant was a proper person, and that the welfare and interest of the child was promoted by the adoption.
- A new requirement was added that an applicant needed to provide the judge with any particulars known to them relating to the assets, liabilities and financial standing of any parent of the child.
- A specific section was provided listing considerations for the judge or Director when considering whether an applicant was a proper person. This included age, state of health, results of any x-ray examination considered necessary or desirable, their assets liabilities and financial standing, personal repute, place of residence and the accommodation available there, ability to have children, the size of their family, family stability, and personal maturity and ability to give love and care to a child.
- The provision empowering judges to discharge an order of adoption was varied. The application to discharge an order of adoption could only be made by the Director or Attorney General. This could be granted where:
    - the order, or any consent, was obtained by fraud, duress, or other improper means, or
    - there was some exceptional reason why, subject to the welfare and interest of the child, the adoption order should be discharged.

  However, a judge was not to make an order for discharge if it appeared that the making of that order would be 'prejudicial to the welfare and interest of the child'.
- Section 24A was added. This protected the Minister, Director, or officer of the Department, or those who had carried out any duty or function under the Act. They would not be personally liable for anything done or omitted in good faith in, or in connection with the work under the Act. Subsection (2) specified that anything done in good faith and for the reasonable or probable cause in promoting the welfare and interest of a child was deemed to be done pursuant to the Act.

Further changes – from 1972

3.128 Together with the commencement of the 1971 amendments, which was in 1972, the Rules were amended. These added a new requirement that where an application sought to dispense with consent, the application and affidavits were to be served on each person whose consent was sought to be dispensed.

3.129 In 1973 amendments were made which affected adoptions where the adopted child was a child or relative of the adopting parents. The offence relating to identifying any person involved in an adoption was also broadened.

3.130 In 1975, the Adoption of Children Act was amended by the *Family Court Act 1975,* to provide for adoption applications to be made to the new Family Court of Western Australia, rather than the Supreme Court of Western Australia.

3.131 In 1976, multiple amendments were made to the Act:

- Use of the term 'illegitimate' was replaced by the term 'a person whose parents were not married to each other at the time of his birth or subsequently'.
- Consent could be given less than 7 days following the birth of a child, if the mother was giving that consent pursuant to the law of another State or Territory.
- The ability to change a child's first name was limited. Where a child was over 12 years of age, changing the child's first name required the judge to be satisfied that the child agreed to be known by that other name.
- The offence of coercion was re-framed so that it no longer referred only to coercing mothers, and included coercion to revoke an instrument of consent.
- The offence of placing a child without the written consent of the Director was expanded to apply not only to the person who gave effect to the placement, but also to the person who received the child.

Opening access to the original birth entry, and creation of the Adoption Contact Register – from 1980

3.132 Further amendments were made in 1980.[225] As a result of those changes:

- A judge could shorten the period of notice required to be given to the Department for Community Welfare, or to the surviving members of a deceased spouse's family, when seeking to apply for an adoption. A judge could also dispense with the requirement to give notice to the surviving members of the family.
- Clearer rules were implemented in relation to a child's surname. It was no longer at the discretion of an adopting parent whether a child retained their surname. Where the adoption was by 2 persons who were married, the child received the adoptive father's surname. Where the child was over the age of 12, the child was able to continue using their existing surname, if they wished to do so and it was for the welfare and in the best interests of the child.
- Where an adoption took place outside Australia, and the family lived in Western Australia, the Director was able to supervise the welfare and interests of the child for a period of 12 months.
- The offence relating to removal of a child from WA before an adoption order had been granted was expanded.[226]
- Section 24B was introduced, which provided that the Director may provide services assisting people to obtain an adoption, and the Minister could determine the charges to be paid for such services, by publication in the Gazette, and could also waive the payment of any charge payable.[227]

3.133 In 1985, multiple amendments were made to the Adoption of Children Act.[228] These included:

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225 *Adoption Act Amendment Act 1980* (WA).

226 *Adoption Act Amendment Act 1980* (WA) s 7.

227 *Adoption Act Amendment Act 1980* (WA) s 8.

228 By the *Adoption of Children Act Amendment Act 1985* (WA).

- Changes to the classifications of persons who were eligible to adopt a child.[229]
- Changes to the requirements and standards for prospective adoptive parents.[230]
- The introduction of separate representatives for children in certain adoption proceedings.[231]
- The surname that could be given to an adopted child was now the surname available if the child had been born to the adopted parents.[232]
- A report in writing would be made to the judge, which could refer to a new set of matters[233] or any other matter or opinion that the person making the report considered relevant to the proposed adoption.[234]
- Arranging an adoption could only be done by the Department, or an approved adoption agency.[235]
- Penalties for multiple offences were increased to $2,500,[236] and in some cases $2,500 or imprisonment for 6 months.[237]
- A specific clause was inserted providing for adopted persons to apply for an extract or certified copy of their original entry of birth.[238] Counselling with an approved counsellor was required before the information would be provided.[239]
- The 'Adoption Contact Register' was created,[240] and offences were introduced relating to information regarding adoptions.[241]
- A limitation period was introduced for offences under the Adoption of Children Act.[242] Proceedings for such offences could be commenced only within 6 months after sufficient evidence came to the knowledge of the Attorney General.

3.134 The 1985 amendments were the final significant changes to the historic adoption act. In 1994, the new *Adoption Act 1994* (WA) (Adoption Act) was passed, which replaced the Adoption of Children Act.

3.135 This chapter considered the development of adoption law during the inquiry's focus period. Those affected by forced adoption continue to be affected by the current Adoption Act. This is discussed within Chapter 12, Chapter 13, and Chapter 15.

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229 *Adoption of Children Act Amendment Act 1985* (WA) s 3.

230 *Adoption of Children Act Amendment Act 1985* (WA) s 8, which amended sections of the *Adoption of Children Act 1896* (WA) including 5(1), 5AA, 5E, and 5G.

231 *Adoption of Children Act Amendment Act 1985* (WA) s 10.

232 *Adoption of Children Act Amendment Act 1985* (WA) s 11(a).

233 *Adoption of Children Act Amendment Act 1985* (WA) s 8.

234 *Adoption of Children Act Amendment Act 1985* (WA) s 10.

235 *Adoption of Children Act Amendment Act 1985* (WA) s 4.

236 Including advertising adoption (s 19), coercing a person in relation to adoption (s 21), and payment for an adoption (s 24B).

237 Including publishing the details of parties to an adoption under (s 20), and placing a child for adoption or arranging or negotiating an adoption (s 23).

238 *Adoption of Children Act Amendment Act 1985* (WA) s 25.

239 *Adoption of Children Act Amendment Act 1985* (WA) s 25.

240 *Adoption of Children Act Amendment Act 1985* (WA) s 26.

241 *Adoption of Children Act Amendment Act 1985* (WA) s 26.

242 *Adoption of Children Act Amendment Act 1985* (WA) s 23.

CHAPTER 4
Pregnant women and unborn children

4.1 Persistent trauma is at the root of the differing experiences of mothers and adopted people. The following chapters explore the origins of that trauma. They are based on the lived experience evidence of events in WA documented by this inquiry. The births in question took place between 1948 and 1981. The year that the birth relevant to the contributor occurred is noted after quotes, for context. Some experiences during pregnancy took place in the preceding year.

4.2 This chapter examines the circumstances surrounding unmarried women's pregnancies, the options available to them, and the ways they were isolated and disempowered. Many spent time in confinement institutions, and interacted with public servants in relation to the adoption of their unborn child. However, some did not intend, or realise, that these interactions put them on a pathway to adoption. Women in evidence wanted their babies and had developed a connection with them during their pregnancies.

4.3 Evidence discussed in this and the following chapters clearly demonstrates the deep and far-reaching effects of forced adoption. It is important to appreciate the double impacts of each of the events reported, because behind each experience shared lies another untold: for every mother who lost her child, there was a baby who was removed, and vice versa.

Circumstances

Forced adoption affected a variety of women who were pregnant in differing circumstances

4.4 The circumstances in which children are conceived and born should never affect how their mothers are treated during pregnancy, labour and after birth. However, for much of last century, a significant number of unmarried women in WA were subject to discrimination and ill-treatment as they entered motherhood on the basis of their marital status. This section illustrates that while some women who experienced forced adoption were young and still at school, others were mature, professional and independent. At the same time, unmarried pregnant women were too frequently mistreated and isolated. All deserved assistance, support and protection.

4.5 Mothers became pregnant in a variety of circumstances. Some were in their teens, and others were in their twenties. While one mother in our evidence gave birth at the age of 29, some were as young as 14 when they conceived. Mothers who spent time in Hillcrest encountered others even younger:

> I shared a room with an 11-year-old girl who was pregnant. She gave birth just before she turned 12.[243] [1970]

4.6 Where mentioned, fathers ranged in age from 16 to 27 at the time of conception or birth.

4.7 Mothers who gave evidence were of all socioeconomic backgrounds, lived both at home and independently, were students or employed, were from both Perth and country towns across every region of WA, as well as interstate.

[243] Private individual 15, transcript of evidence. See also: Submission 50.

> I was 23 years old and had only ever wanted to be a mum. I trained in nursing at the Royal Children's Hospital Melbourne, graduating 1966 and registered and working as a State Registered Nurse.[244] [1968]

4.8 Some had single encounters, some had boyfriends, some were in relationships with married men, and some were engaged to be married.[245] One contributor married while pregnant.[246] It was not uncommon for pregnancy to be the result of rape, or for women to have experienced abuse prior.[247]

4.9 An understanding of sex and conception was often lacking or limited.[248] Contributors spoke of being naïve, of being coerced or duped by their sexual partner, or experiencing shock or disbelief at the outcome:

> The other girls in the home were all older than me and took me under their wing. I even learnt how I got pregnant. I remembered that when I had to give evidence during the questioning about my uncle that I referred to both male and female private parts as penises. In the home the girls taught me what they really were and how they worked and how a pregnancy happened. I realised at that time, that none of the girls, me included, were "bad girls". Just unlucky. I knew a lot of girls who I would have termed "bad" and I was not like them.[249] [1966]

> It was hard understanding that I was pregnant, because you did not know anything back in those days. Like I said, there was no sex education. The word "sex" was a wrong word. You never said that. It just did not exist. So to actually have had sex and have disjointed knowledge of what you could or could not or should or should not do[250] [1966]

> I was told I was pregnant by my G.P. at 8 weeks. I couldn't believe that this could be true! We had hardly been intimate. I was in despair.[251] [1968]

> I was a shy fifteen year old student at high school sitting for my junior examinations. I was young and vulnerable with little knowledge of human reproduction. I succumbed to a young man of seventeen, lost my virginity and became pregnant. I was naïve that I did not really admit I was pregnant until some 16 weeks into my pregnancy.[252] [1968]

> I was very naïve as far as birth control was concerned.[253] [1970]

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244 Submission 37.

245 The inquiry received no evidence from women who were married or widowed and experienced forced adoption.

246 Submission 20; Private individual 21, transcript of evidence.

247 For example: Private submission; Submission 23; Submission 50; Submission 73; Submission 82; Submission 94; Submission 108; Private individual 15, transcript of evidence; Private individual 20, transcript of evidence.

248 Dr Christine Cole observed that 'professionals dealing with unwed mothers and fathers in this country, drew on research findings that labelled unwed mothers as 'deviant' … Whilst ignoring research … that offered explanations such as lack of sex education combined with a relaxing of sexual taboos, as the rationale for rising illegitimacy' (C Cole, *Stolen Babies - Broken Hearts: Forced Adoption in Australia 1881–1987*, unpublished doctoral thesis, University of Western Sydney, June 2013, volume 1, p 66 in Submission 72).

249 Submission 108.

250 Private individual 9, transcript of evidence.

251 Submission 109.

252 Submission 59.

253 Submission 7

> I wasn't happy with what was happening, but he was so insistent that I didn't think it possible to refuse him and so I just went along with what was occurring.[254] [1968]
>
> I was always telling him I was frightened of getting pregnant, and he said he had a way of making that not happened. I believed him. I had no sex education from mum except the bad girl stuff so I had nothing to draw from. I just blindly believed him.[255] [1970]
>
> It's quite humorous to think I was top of sex ed class the year before. Content without context, teaching us all the basics of physiology and biology of conception then omitting contraception and consequences of an unwanted pregnancy – why oh why had it not been included![256] [1979]

4.10 Evidence received related to first pregnancies, with the exception of four contributors: one had lost her first child to forced adoption but managed to keep her second child while unwed, one lost her second child to adoption, and 2 adopted people had older siblings who were also adopted.[257]

Some women had support for their pregnancy

4.11 Women in some of the evidence of forced adoption in WA described having solidarity with the fathers of their unborn children in relation to their pregnancy. Others described being supported by one or both of their own parents, or the parents of the father. Sometimes women were in the difficult position of being supported by some close family but not others.

> [Father-to-be] was fully supportive throughout my pregnancy despite us not being allowed contact, which we did by mail.[258]
>
> I had told [father-to-be] I was pregnant. His family were so excited about it. And made room for me and said they would help me, adoption was off the table for them and I felt hopeful.[259] [1970]
>
> Throughout this period I was in contact with the father of my baby and we planned to keep our child and a layette was gradually purchased as he was working. … Welfare Department records, which I have recently acquired, showed that my father was against me coming home with my child, however, my mother said that she would insist that I be allowed home and that she would help me take care of my baby.[260] [1968]
>
> My mother and my extended family wanted to raise me.[261] [1965]
>
> I had just found out I was 14 weeks pregnant, and I was not sure what to do. My parents wanted me to keep the baby. My boyfriend's parents banned me from their house as they didn't want anyone to know. My boyfriend's parents suggested

254 Submission 50.

255 Submission 82.

256 Submission 98.

257 Submission 52; Submission 68; Submission 42; Private individual 12, transcript of evidence. Evidence was also received from 2 mothers who gave birth elsewhere and had each of their first three children removed: Submission 114 (these births took place in New South Wales in 1966, 1968 and 1970); Submission 64 (these births took place in Victoria in 1947 and 1949, and in New Zealand in 1951).

258 Submission 81.

259 Submission 82.

260 Submission 59.

261 Private individual 22, transcript of evidence.

> adoption and my boyfriend agreed with this. My parents were against this however, the decision was left up to me.[262] [1981]

4.12 Mothers also explained that they had support from other family members, but ones who had less influence on the outcome of their pregnancy. Women spoke of having grandparents who tried to do what they could, or family friends who offered a place to stay, or aunties who tried speaking to their unsupportive parents.[263] Some had siblings who took them out when they were being hidden away from visitors at home,[264] or who supported them financially through their pregnancy:

> My plans, prior to falling pregnant were to travel to the United Kingdom where I intended to work as a nurse, and I had been saving accordingly to make this trip. In my time in Perth, my savings steadily dwindled. My dear brother transferred from the Commonwealth public service in Sydney to a similar Perth office. He supported me financially and emotionally during that time and has never really recovered from his own trauma of the pressure to adopt from our family and the social worker and the events that he experienced while in Perth with me. Years later he would said that he "couldn't bear to see you deteriorate from his bright little sister to a gaunt sad woman."[265] [1968]

4.13 A WA woman sent to stay with relatives in Sydney while pregnant said that they 'were lovely people and never shamed me'. [266] [1966]

4.14 One submitter who was completing her nursing training in 1966 had the support of a matron at Sir Charles Gairdner Hospital in deferring part of her training in order that she could continue after her child was born.[267]

4.15 The inquiry evidence paints a more complex picture than is commonly depicted in relation to general attitudes towards unwed pregnant women at the time. Submissions such as the following illustrated this complexity:

> The practice of removing children from unwed mothers was so normalised at the time, and adoption was generally considered 'the right thing to do' if you cared about your child. Friends, family, colleagues and strangers offered different and confusing advice for and against adoption based on their own experiences and values.[268] [1973]

Some unwed pregnant women were subjected to social shame

4.16 However, it is undisputable that some – if not many – women felt the effects of social stigma associated with being pregnant and unmarried.[269] This theme is discussed throughout this report.

4.17 Sometimes this took the form of small but constant slights. For example, one mother described being ridiculed by hospital staff during routine antenatal appointments, and how it felt taking a form into the Labour Exchange every fortnight:

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262 Submission 70.

263 Private individual 15, transcript of evidence; Submission 124a; Submission 7.

264 Submission 7.

265 Submission 37.

266 Submission 33.

267 Submission 52.

268 Submission 124a.

269 For example: Submission 89; Submission 52; Submission 154. Fathers-to-be did not seem to endure the same treatment.

> The Nursing Sister on duty took delight in calling loudly for me as "Miss [Name]" for all the other patients to hear'. … I soon became used to the attitude of public servants to me as a single mother. The public servants were seated in a room like a long classroom. Sent to the person in the back row, I had to pass all those staring, disapproving looks of distaste. How superior they looked. I kept a straight back and held my head high. There but for the Grace of God went I.[270] [1968]

4.18 At other times, women felt the full weight of religious morality and judgement:

> I knew I was pregnant. Somehow my priest found out and came to see me and asked me if it was true and I denied it. I was then mentally tormented as I had lied to my priest and felt unworthy to go back to church and have never done so. I thought that I was denied by God and would go to purgatory.[271] [1966]

> [Mother's Name] was made to feel, I guess, not worthy. She was made to feel that she was a failure for falling pregnant in the first place. Also, being in a Catholic family, there was a fair bit of the Catholic Church and also even the hospital in Fremantle … There was a lot of guilt involved around that, from what she relayed to me. … It was very much a guilt process from her perspective, understand.[272]

4.19 Socially, women were subjected to shame, while at the same time being confused about what they were guilty of. Of their experience, mothers wrote:

> No one knew what to say to me. I didn't know what to say to people because being an unmarried mother carried such a huge stigma there was no cutting through or going around its enormity but no one if asked would have been able to explain why it carried so much loaded negativity and shame. You were not fit to be in the presence of those who had not got pregnant and don't think you can come back home and pretend nothing happened your past is never forgotten. The child has to carry this burden as well that society has put upon the mother.[273] [1969]

> My biggest guilt was that I was fertile. How many other young girls fell pregnant at the same time? Or did not fall pregnant; they were just lucky.[274] [1964]

> My sin - our sin - was having had sexual intercourse without the blessing of marriage. Like many others had before and after us, but we had been caught out! But we loved each other, how could that be a sin? The proof we had sinned was a child! A child is a blessing not a sin. One of those many bigoted, religious, moral decisions: made by man. How then are non-Christian peoples on this earth, whom God is supposed to have created, not separated from their children at birth? Absolute hypocrisy!![275] [1957]

4.20 While social attitudes towards sex and marriage shifted in the latter half of last century, the judgements and beliefs of the past persisted and continued to impact unwed pregnant women. Contributors commented on the origins and extent of these negative views:

> Patriarchal society within governments and the religious sector (indoctrination) have had influences over the masses for centuries. … To witness the judgements in regard to Unwed Mother's simply look up backdates of "Hansard". We were

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270 Submission 37.

271 Submission 108.

272 Private individual 8, transcript of evidence.

273 Submission 104.

274 Private individual 21, transcript of evidence.

275 Submission 81.

> considered " feeble minded ", inferior, second class citizens , mentally unstable, and unfit to raise our own beloved children.[276] [1973]
>
> At the time, the view that married couples could provide better opportunities for newborns was so widely held that The Medical Journal of Australia published the opinion that 'most unmarried mothers . . . are more likely to be poor, undernourished, and of low intelligence, if not actually retarded'.[277] [1972]
>
> [Matron of WA institution] believed that adoption could purify the community and prevent the societal perils of single parenthood.[278] [1972]

4.21 Participants in a study looking at unmarried women who kept their babies at the time did not report experiencing stigma and shame. The researcher concluded that other women were exposed to a 'bigoted minority.'[279]

Some women kept their pregnancy secret

4.22 In some cases, women that felt ashamed and afraid concealed their pregnancy from fathers-to-be, parents, grandparents and other family.[280] Women sometimes did so in elaborate ways. For example:

> I was unmarried, 18, into my second year of my apprenticeship, earning five pounds a week, when I fell pregnant. I knew in no uncertain terms, to keep it a secret from my family and my job. The first 5 months I was in denial, until I couldn't hide it anymore (my stomach!!).[281] [1964]
>
> She told her family she had a job in Melbourne so they thought she had left the state. When she had me, I was carried away without her permitted to see me. She was a migrant, her European family never knew about me, and I knew very little about them.[282] [1965]
>
> None of her family knew she was at Ngala. To keep my birth a secret my mother's employer, the matron at the Pilbara hospital hatched a plan. My mother would keep writing to her parents each week, posting her letters to them via the Matron, who then placed the letter in an envelope postmarked with the Pilbara towns stamp and an envelope previously addressed by my mother's own handwriting. Unbeknown to my grandparents these weekly letters had travelled up and down the length of the state, before arriving in their mailbox in the Southwest of WA. My grandparents would not learn of my existence until I arrived on the scene 20 years later.[283] [1972]

Fathers were excluded

4.23 Fathers in evidence included some who didn't know about the pregnancy, and others who wanted to support their partners and be involved in raising their children, but were

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276 Submission 6. This submission does not specify which Hansard is being referred to. WA Hansard does not significantly focus on the qualities of unmarried mothers. Mothers are not discussed substantially until proposed amendments designed to ensure they were not subjected to pressure to adopt – see Chapter 3. Submission 72 discusses this view of unmarried mothers in general and in relation to New South Wales.

277 Submission 112.

278 Submission 110.

279 Submission 72.

280 For example: Submission 52.

281 Submission 20.

282 Submission 123.

283 Submission 110.

prevented from doing so. Some were prohibited by their own parents, and others were excluded by the mother's parents, as well as the institutions and agents involved in adoption.

> [Father-to-be] was from Queensland and on a working holiday. My Mother got him a job to drive a vehicle to a mine site up north and he left before I knew I was pregnant and I had no way of contacting him.[284] [1967]

> The father accepted responsibility. However, his parents, who owned a large, remote cattle station, made it clear that their son would be disinherited if he married me. They considered that he was too young take on the responsibility of a wife and baby and that I wouldn't cope with station life.[285] [1969]

> I fell in love with my girlfriend, now my wife of 53yrs. I believe our first son was taken/stolen/kidnapped. … Upon learning of my then-girlfriend now my wife, being pregnant, I wanted to be included in decision-making, with my wife but … I was informed not to visit because there was a Restraining Order on any contact between the two of us. I was excommunicated from everything. Not able to take part in any decisions about our future and our baby. … This left me with nowhere to go with my own wishes in making decisions for our future and baby.[286] [1968]

> During my pregnancy… as a rule, I cried myself to sleep. One night, … I was awakened by a voice outside my bedroom window. It was my [boyfriend]. He had found out that my family had moved. He comforted me and we whispered for hours. He told me that he and his parents were against the adoption and they knew not, how to stop it, from going through.[287] [1968]

> we planned to meet after the baby was born in the hospital and leave together with the baby and move into the house that his mum had brought next door to her. Not as a couple but as parents. He never arrived, I was heart broken. I found out 20 years later that My father had told the family they were not to come to the hospital to visit me and would be removed if they did. I felt that deep rejection once again.[288] [1970]

> In 1968 my girlfriend became pregnant due our love for each other. [Girlfriend] delivered a baby girl in January 1969 when [she] was 17 and I was 17. During [girlfriend's] pregnancy she was, against her will, locked up in Ngala Home in South Perth, and I was unable to see her despite our love for each other. We were both told that the baby was to be put up for adoption and we were not given any option at the time. My understanding is that our respective parents were also not given any options at the time.[289] [1969]

Some women had no support

4.24 Some pregnancies were the result of rape, for which no consequences were reported in evidence. While some fathers were not in ongoing relationships with mothers, other men were able to opt out of fatherhood:

> the father of my daughter abandoned me.[290] [1970]

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284 Submission 52.

285 Submission 7.

286 Submission 88.

287 Submission 109.

288 Submission 82.

289 Submission 61.

290 Private individual 15, transcript of evidence.

> I eventually was told he could not handle the responsibility of the child and so he broke up with me. It was the worst time ever, We had already collected baby furniture and his sister had given us some clothes and things for the baby. [1970][291]

> talking to my birth father, they were travelling around the country at the time. They were in their early 20s. She fell pregnant. They were in Perth, where I was born, at the time, and then continued to travel afterwards for a period until they separated. He did mention that at the time things were different—the culture was different and society was different—and in a letter to me he acknowledged that he probably pressured my birth mother to adopt me as well, because he was not quite ready for that commitment at his age. I can only imagine that she had pressures from him as well as society at the time. I have no idea whether her parents were aware, and no idea whether his parents were aware either. I do not have the information. [1970][292]

4.25 Some pregnant women received no support from their own families.

> My Mother and my baby's father, Ian, would come to visit me every couple of weeks and I would sit in the car with them for about a half an hour so that no-one would see them with me. My feeling of shame grew. My Mother kept telling me that they (the welfare department) were going to give my baby to a married couple who would give my baby a better life than I could. How could I?, she would say? You don't have a job, you have nowhere to live and nothing to give a baby. That was how I found out that I wasn't welcome back home after I left the home.[293] [1966]

> Towards the end of my pregnancy, I asked my parents if I could keep my child. They said they would think about it. When they returned the answer was "no". I was extremely upset and confused and very unsupported and not knowing where to go for help. There was never any counselling or support at Ngala.[294] [1967]

> At the time I had very little support from my Mother as she was in a new relationship with the man who would become her 3rd husband. He was a Catholic and had no sympathy for me.[295] [1967]

> I could never have bought here back to the town I lived in as Mum said she would not help me if I did. Mum did help but only so long as I would do what she thought was best.[296] [1969]

> if you displeased my mum you where out, never spoken to again. I mean never, so when she said to me if you keep this child you can never ever return here. I new never was never. It terrified me. She was my mother and I so wanted her to love me.[297] [1970]

4.26 Mothers spoke about the judgement and shame they felt from their own families. Some family relationships broke down and were never restored.

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291 Submission 82.

292 Private individual 13, transcript of evidence.

293 Submission 108.

294 Submission 89.

295 Submission 52.

296 Submission 104.

297 Submission 82.

> I played the organ in church … My parents were very angry with me and said that I was totally to blame for being pregnant, that I had disgraced them and that I alone was responsible for the situation I found myself in. [298] [1968]
>
> I was in shock and felt vulnerable and was made to feel a huge amount of shame. … I was in disbelief for a long time about the whole situation of being not supported by my parents and being made to feel ashamed of myself … This whole situation also affected my relationship with my brother as he bought into society's belief system about unwed mother's and judged me. Until today my brother still has nothing to do with me. I've lost my brother. [299] [1967]
>
> There was a veil of silence concerning the whole matter and my family never spoke about it then, nor in the years that followed.[300] [1968]
>
> [Mother's Name] was estranged from her mother. After giving birth to me and moving back to the family home, her mother pretty much refused to acknowledge her, and that played out for the rest of her life, even though they were actually neighbours in the very next house, next to each other. For the last 20 years of my grandmother's life, her and her daughter never actually spoke.[301] [1965]

4.27 In some cases, the father of the unborn child decided on adoption:

> I was grateful the father was marrying me because I felt ashamed for being pregnant, but he stipulated if it was a boy, we would keep it; if it was a girl, we will have her adopted. We had a girl.[302] [1964]

4.28 In other cases, it was the mother's parents or other family who insisted upon adoption, or who first introduced the idea:[303]

> They were concerned for my health and welfare, and while I acknowledge they had my best interests at heart their insistence that I go ahead with the adoption was to neatly tidy up 'the problem' I had created within the family.[304] [1973]
>
> My Parents, who I was never close to, especially my Father who refused to speak to me at all when it became known that I was pregnant, made it abundantly clear that I would not be keeping my child.[305] [1969]
>
> I was coerced into adopting my baby by my parents, who worried about the social stigma of having an unmarried pregnant daughter, and I had no means of supporting myself and child.[306] [1968]
>
> My mother would come in. Often. Sometimes several times a day, and try to persuade me that raising my baby wasn't a good idea when it meant we would have to live 'up here' and the baby would be teased unmercifully. Every so often Mum would randomly drop in adoption might be a good idea. I refused to consider it until one day worn down from endlessly hearing how impossible it

298 Submission 50.

299 Submission 89.

300 Submission 59.

301 Private individual 8, transcript of evidence.

302 Private individual 21, transcript of evidence.

303 See also: Submission 103; Submission 94; Submission 89; Submission 116a; Submission 7; Submission 8; Submission 43; Private individual 23, transcript of evidence.

304 Submission 124a.

305 Submission 104.

306 Submission 43.

> would be to raise my baby and not getting much encouragement - I relented and said I would see what adoption was about.[307] [1979]
>
> Either way, my biological mother was advised that should she keep the baby (me) she would never be welcome home again. My existence was rejected, and the only "solution" presented for my biological mother's survival was adoption.[308] [1981]

4.29 In coming to this position, the parents of pregnant women were influenced by social, religious, moral, practical and financial considerations. These private decisions may be thought to be beyond the purview of the state. However, in the UK in the 1950s, Manchester University Department of Psychiatry researchers ran a study including a successful intervention. It showed that counselling the parents of young unmarried pregnant women enabled them to overcome 'initial shock' and to change their attitudes. This allowed more unmarried women in the study to raise their children with family support.[309]

4.30 Of their clients' experiences, Adoption Research Counselling Service observed that commonly there was 'no action taken to support them, no action taken to support their family to help them'.[310]

4.31 The evidence reveals how women were funnelled into the adoption system often, but not exclusively, without supportive people nearby.

Options

Women with no support had few options

Contraception

4.32 For the majority of the 1900s women had limited access to reliable contraception, and submitters reminded the Committee that 'an unmarried woman/girl could not be prescribed the pill'.[311] Once pregnant, some women felt they had few viable options.

> I felt I only had 4 choices. 1. Get married but [partner] wouldn't. 2. Have an abortion but that was illegal and I had no idea how to get one living in the country. 3. Adoption - that way Mum and Dad wouldn't know and the baby would have a normal happy life. 4. Commit suicide- which I wasn't quite up to. (A couple of years later when I thought I was pregnant to [partner] again suicide was definitely preferable to adoption. Luckily I wasn't pregnant)[312] [1966]

Marriage

4.33 Women explained their valid reasons for not wanting to marry. For example:

> [My boyfriend] suggested to me that "we could get married". However, I knew that at that time RAAF cadets had to be single, so he would have to give up his dream to be a Mirage jet fighter pilot. He was captain of his class and the top student in his academy. That would not be a good start for any marriage and I could see that

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307 Submission 98.

308 Submission 134.

309 E Anderson, J Kenna, and M Hamilton, 'A Study of Extra-Marital Conception in Adolescence' *Psychiatria et Neurologia*, Basel, 1960, 139: 313-362, pp 331-333, cited in C Cole, *Stolen Babies - Broken Hearts: Forced Adoption in Australia 1881–1987*, unpublished doctoral thesis, University of Western Sydney, June 2013, volume 2, pp 22-23 in Submission 72.

310 J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

311 Submission 37. See also: Submission 154.

312 Submission 33.

> a divorce would be the inevitable result. Thus, I chose to remain a single mother.[313] [1968]

4.34 Others were unable to marry because of their young age.

> [Father-to-be] said he would marry me, but as I was under 16 this wasn't possible. … My plan was to keep my baby and as soon as I turned 16 to marry [father of child]. My baby was due in November and I would turn 16 in January. I thought that if only I could find someone to help me for those few months I would not lose my child. [314] [1968]

4.35 As this report reveals, being engaged or getting married during pregnancy was no protection against forced adoption.[315] Some parents in evidence went on to marry and raise other children after losing their first born to adoption.

Working parenthood

4.36 Mothers stated that they lost their employment at this time, as was common upon becoming married or pregnant across a period of last century.

> I was a teacher in Marble Bar in 1969 when I became pregnant. … I had to resign from the education department, as was required in those days.[316] [1970]

4.37 Further, as one mother explained, continuing to work was difficult because 'there was … no childcare for babies under 18 months of age in 1969'.[317]

Solo parenting

4.38 Another mother without family support was told that no other support existed:

> I once went to King Edward Memorial Hospital and asked the social worker there if anyone could help me, but was told that no help was available to me.[318] [1968]

4.39 Women faced difficult financial situations with respect to raising their child alone:[319]

> At the time there was no social security benefit for single mothers, my family had said that they would deny me any family support, I had no support from the father, no income, no more savings and no childcare for babies under 18 months of age in 1969.[320] [1969]

> To keep the baby and raise it as a solo parent was not even a option I thought of. I had no work training, earnt $2 a day working 5am to 6 pm on the farm. I did not think I could possibly care for my baby.[321] [1966]

313 Submission 37.

314 Submission 50.

315 For example: Private individual 21, transcript of evidence.

316 Submission 7. See also: Submission 154.

317 Submission 37.

318 Submission 50.

319 For example: Submission 89; Private individual 27, transcript of evidence.

320 Submission 37.

321 Submission 33.

> I dearly wanted to keep my baby if I could have and there had been an opportunity, but there were just no supporting parents benefits in those days. [322] [1970]

Abortion

4.40 Women who were aware of abortion knew that it was criminalised for most of last century,[323] and were also aware of the risks then involved:

> Abortions were all 'backyarders' then, and we didn't even consider it.[324] [1957]

> Not that I ever considered abortion as I was not prepared to jeopardise future babies.[325] [1968]

4.41 Another mother was recommended abortion by a GP, and referred on as told was required by law, but ultimately denied the procedure.

> Both psychologists did give clearance to end the pregnancy. They reported that continuing with the pregnancy would endanger my future mental health. … Although those reports gave clearance, the surgeon refused after examining me, it was to be a dangerous situation for both myself and my baby.[326] [1968]

4.42 One mother firmly decided against abortion. She concealed her pregnancy and was relieved when the GP confirmed that termination would not be possible at 5 months gestation.

> Abortion was an option in 1979. In remaining pregnant, I chose parenting my baby over terminating a life. If I knew what was to happen I would have had a termination.[327] [1979]

4.43 Some women considered their prospects so bleak that they attempted to end their pregnancies themselves:

> I tried to hide it, thinking that it would go away. I looked for ways and started to find out from girlfriends and other friends that there were ways of getting rid of a baby, like riding horses or drinking castor oil. I tried everything like that. Nothing happened. [328] [1966]

> I was too ashamed to tell anyone. Who knows what else was going through my mind. I started wearing a tight girdle and became an introvert staying in my room hiding. I tried jumping off my dressing table to cause a miscarriage, having very hot baths and even tried to break my waters with a catheter but nothing worked.[329]

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322 Private individual 15, transcript of evidence.

323 The first changes were introduced in 1998 through the *Acts Amendment (Abortion) Act 1998* (WA), which removed offences for procuring abortion and introduced health regulation for abortions. Abortion was only fully decriminalised in WA in 2023.

324 Submission 81.

325 Submission 37.

326 Submission 109.

327 Submission 98.

328 Private individual 9, transcript of evidence.

329 Submission 52.

Adoption

4.44 One unwed mother explained that she chose to travel from Perth to London to give birth in 1970. Her submission highlights both the general lack of choice and the existence of alternatives, for those who had the means to choose.[330]

4.45 Other mothers submitted that they were influenced by media coverage of adoption as the 'best solution'.[331]

4.46 Temporary foster care was a possibility during the inquiry period, and some mothers in evidence discussed in what follows did want this kind of help while they found their feet. However, it seems few pregnant women were made aware of this option.

Suicide

4.47 Mothers in evidence also documented their attempts at taking their own lives due to being pregnant:

> The fear, that I would have to let my parents down filled me with dread. … I felt obligated and always tried to be a "good girl". Now I was slut, no one would want to marry me and this idea compounded a very low esteem. I'd had my driver's license for only a few weeks and used my car in an attempt to drive off a nearby cliff. I was scared of my stepfather's return.[332]

Financial assistance was available, but few knew this

4.48 Although many women believed they were not eligible for any social support payments, this was not strictly the case: a number of applicable Commonwealth support payments existed. The Senate report on the Commonwealth's role in forced adoption lays out the different federally paid benefits potentially available to unwed pregnant women last century. These are summarised in the box overleaf.

4.49 Some women in evidence did seek to understand what was available, to be told they did not qualify.

> I was too young to access Special Support by 3 months, as in, if I had been 3 months older when I gave birth I could have accessed emergency special support from social services before being eligible for Sole Parent support when I reached 16. I found this out when I contacted Social services in October 1971. I had no support for funds nor accommodation from government, medical personnel, child welfare personal, nor family. I applied for various jobs unsuccessfully. Hoping I could find a job and maybe then I could get accommodation. I was in my 3rd year of high school and knew it would be difficult to raise a child in my circumstances but knew that I could at the very least do better than my parents had been able to, that I would love my daughter with all my heart and that this was the best option for my child. It broke me when after much effort to obtain, work or income and accommodation I knew that it was not a possibility.[333] [1971]

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330 Submission 19.

331 Submission 33. Submission 72 discusses the introduction of reciprocal adoption legislation between Australian states in 1948 as examined by Dr Rosemary Kerr. Kerr's thesis states the departments handling child welfare in each jurisdiction began a propaganda campaign 'to complement the legislation' and constructed adoption as 'being in the best interests of the child and a service to the state' (R Kerr, *The State and Child Welfare in Western Australia 1907–1949*, unpublished thesis, Curtin University of Technology, 2005, p 156, cited in Submission 72, p 4).

332 Submission 109.

333 Submission 94. 'Special Support' was likely the Commonwealth social security payment called 'special benefit'.

Commonwealth benefits relevant to unmarried pregnant women at the time

Unemployment or sickness benefit: The *Unemployment and Sickness Benefits Act 1944* provided for 'ex-nuptial confinement up to 12 weeks prior and 6 weeks after the birth of a child'. In 1954 the means-tested payment was available for six weeks prior to birth, and the rates for unmarried people were 1 pound 11 shillings for ages 16 to 18, 2 pounds for ages 18 to 21, and 2 pounds 10 shillings for those aged 21 or over. An additional 5 shillings per week was available to those caring for one or more children. These payments did not assist those under the age of 16.

Maternity allowance: The *Maternity Allowance Act 1912* (Cth) provided for a one-off payment almost twice the average minimum weekly wage. Excluded Aboriginal mothers, and did not increase in the event of multiple children from the one birth. It 'could not contribute significantly to the ongoing maintenance of a mother and her child'.

Child endowment: The *Child Endowment Act 1941* (Cth) provided for 5 shillings per week for people maintaining more than one child, extended to the first child from 1950. This amount 'represented only 5 per cent of the average weekly wage and was therefore far from sufficient for an unsupported mother to provide for herself and her child'.

Widows' pension: The *Widows' Pensions Act 1942* (Cth) provided for a maximum rate of 1 pound 10 shillings (indexed) to unmarried women with dependents who lived de facto with a man for three years preceding his death'. This did not apply to most unmarried first-time mothers.

Special benefit: The *Unemployment and Sickness Benefits Act 1944* (Cth) gave the Director-General of Social Services the discretion to pay people in hardship who did not otherwise qualify up to a maximum equal to the unemployment and sickness benefit. In practice, was not routinely paid to unmarried mothers and was only a temporary payment.[334]

Supporting mother's benefit: Available from 1973 to unmarried mothers not entitled to widow's pension at the same rates, after a 6 month waiting period. Became the supporting parent's benefit in 1977. This ongoing payment was enough for single mothers to manage on.

[Source: Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, accessed 18 April 2024, pp 98-113]

4.50 Another mother, who was a nurse, reported receiving unemployment benefit during her pregnancy, and what costs it covered:

> Taking a form every fortnight into the Labour Exchange, stating I had not worked for that fortnight … Financially, the "Labour Exchange" (ie. Centrelink) paid me $16.80 per fortnight. And, I received $16 a fortnight from the baby's father, however unit rental was $44 a fortnight, leaving a significant shortfall.[335] [1968]

4.51 In addition, from 1968 women may have been eligible for payments from the state of WA. While there were a number of benefits administered by the State that unmarried pregnant women or mothers may have been eligible for, these changed over time. The Committee received evidence relating to the means-tested *Welfare and Assistance Act 1961* (WA), which Government information from 1972 told unmarried mothers they could apply for (see Appendix 6).[336] The Act includes women and children without adequate support or sufficient means of subsistence in its definition of 'indigents'.

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334 However, from 1945 Hillcrest received this payment on women's behalf (see Chapter 8, from paragraph 8.79 onwards).

335 Submission 37.

336 Submission 59.

4.52 While it was possible for an unmarried mother to receive maintenance from the father of their child, the mother would be forced to pursue the father for maintenance, and the process was often humiliating.[337] Nevertheless, pregnant women were not advised of this option or any legal or Departmental assistance available to them in relation to seeking it.[338]

4.53 The Senate report highlights that receiving a State benefit may have compromised eligibility for a Commonwealth benefit. Further, it may have required making a statement to allow the father to be pursued for maintenance, and young women may not have wanted to put the father at risk of prosecution for carnal knowledge.

4.54 In their report, the Senate committee conclude that, while it may have been theoretically possible for an unmarried mother and her child to subsist on a combination of the available support payments, in practice adequate and ongoing financial support was not available prior to 1973. By contrast, Dr Christine Cole said that it 'is clear that financial assistance was sufficient if women were informed of these Benefits and that they could and did maintain their infants'.[339]

4.55 Mothers in evidence who gave birth in 1973 or later years were not told about the Supporting Mother's Benefit, or that they were eligible to receive substantial support. An adopted person questioned:

> I was born in December of 1973. Why wasn't my birth mother informed of this, was there a chance that she could have cared for me. If she had known?[340]

4.56 The Senate report discusses that, without partner, family or any other support, paid work and creative living and childcare arrangements were necessary for single unmarried mothers to supplement any support payments and sustain themselves and their child.[341]

4.57 One mother demonstrated this in relation to raising her second ex-nuptial child, who was not adopted out:

> As I couldn't go home due to my now stepfather I went to live with a friend of my Mother's who had been recently widowed. I helped with her 3 children and around the house. I breast fed my baby for 11 weeks, weaned her and found a couple, who lived near SCGH [Sir Charles Gairdner Hospital], who wanted a boarder to help with their mortgage and the wife offered to look after my baby while I worked. I also helped around the house and her children when I wasn't working or studying. This ended up not working out so my Grandparents took us in. It was difficult but I was determined to finish my Nursing Training so we had a future[342]

4.58 One submitter sent in extracts from a book on social security in Australia, and commented:

> not that it was a great amount - but to those in the know enabling them to keep their babies, contradicting the often quoted belief that Gough Whitlam's pension was the turning point in enabling mothers to keep their babies! Those BENEFITS

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337 For example, see Submission 52a.

338 See: Submission 52a. *Administrative Instruction No. 105, 2 June 1976,* attachment 2 to Submission 106 from Department of Communities, 20 June 2023 states: 'The Department has a standard form of maintenance agreement…' As discussed in Chapter 6 and Chapter 12, fathers were often not listed on birth certificates, particularly from 1963 onwards. This had potential implications for the ease with which a mother could seek maintenance from a father.

339 Submission 72.

340 Submission 119.

341 See also: Department for Community Welfare, *Adoption Information and Procedures* (1978), attached to Department of Communities, email, 7 June 2024.

342 Submission 52.

> (NOT pensions) WERE available and only made known to those who insisted on receiving them, or knew of someone who also received help.[343] [1957]

4.59 Contributors also mentioned being supported by charitable organisations:

> I was desperate when I realised, I couldn't hide my pregnancy much longer. I didn't have anyone who I could tell or call on for support. I made the decision to travel to Western Australia hoping my boyfriend might help me, he knew nothing of pregnancy. I asked a friend who was younger than I was (I was 18 years old) to travel with me. We ran out of money within a few days, and I had to seek assistance from welfare agencies. We were referred to St Vincent de Paul who arranged for us to stay in a shelter in West Perth. We stayed for three months. We felt safe at this place.[344] [1965]

Some women saw adoption as the only viable option

4.60 Some mothers described trying desperately to work out how they could keep their children, and coming to the conclusion that they would have to adopt.

> I decided to seek adoption (a quick fix) not realizing the lifelong effect it would have on me and my daughter.[345] [1964]

> I was encouraged to relinquish and due to difficult circumstances I felt it was my only option.[346] [1966]

> After failing to find any viable way of raising my daughter I accepted this as the only possible future for my daughter. … my mother came to me and said , "your father and I think you're pregnant" with further talk as to what would be happening. I already felt defeated by then as I couldn't find a way of keeping her. I was 8 month pregnant.[347] [1971]

4.61 One adopted person questioned the degree to which her mother was really able to make a free and informed decision to adopt:

> She told me that it was her choice to put me up for adoption but she had no choice[348] … I have no doubt in my mind that the people in charge knew exactly what they were doing and were, basically, harvesting babies for people who could not have babies. That was just an easy fix. When she says it was her choice, I do not believe that for a second.[349] [1971]

4.62 Similarly, a mother observed that, between medical practitioners, religious insitutions and hospitals:

> Every point of contact that an unmarried mother was exposed to during her pregnancy and confinement were AGENTS SOURCING BABIES FOR ADOPTION.[350] [1968]

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343 Submission 81a.

344 Submission 73.

345 Submission 20.

346 Submission 22.

347 Submission 94.

348 Submission 63.

349 Private individual 3, transcript of evidence.

350 Submission 59 (emphasis in original).

Isolation

Women were hidden away

4.63 Many women internalised the shame they felt directed at them for being pregnant. Mothers explained that they hid themselves from family, friends, employers and the outside world during their pregnancy. Others had fled to Perth from interstate, or had moved away from their home states before becoming pregnant.

> I was secretary … I had a very good job … I put in a resignation that I was going to leave work. I could not tell anyone I was pregnant because that would be so disgraceful. My boss threw it in the rubbish bin. He would not let me resign! He did not want to lose me. He said "I will give you three months." I could not say that I was pregnant because of the stigma attached to it. He said "I will give you leave. Come back as soon as you are ready." I just said I was going on a holiday. Then, of course, all the staff said 'Where are you going? We will come and see you off on the train!" It was all lies. I had to get on a train and go to Adelaide because everyone wanted to know where I was and they all came to see me off. It was just lies—one after the other. I had to lie to survive.[351] [1957]

> During the pregnancy, I told myself I was worthless … My boyfriend and I hid in a flat in South Perth, until the baby was born. I made a story up, that we were going to Sydney for a working holiday.[352] [1964]

> I had spent the last 6 months at school hiding in the toilets at breaks as the hiding and shame and fear ran my life.[353] [1971]

> I had just turned 20 and was on my own with no real support network in WA other than a distant relative, new friends and work colleagues to draw on in my time of need.[354]

4.64 Other women described being pulled out of school or further studies and being kept hidden at home by their families.

> [Mother's Name] was working at a hotel in Perth doing reception and bar work when, at the age of 23, she fell pregnant to her 52-year-old boss at the time, my father, who I never met. … As a single pregnant 23-year-old, [mother's Name] was scared and not sure what to do. Her Catholic mother was horrified of the disgrace that [mother's Name] would bring on the family and immediately confined her to the house, from what I understand.[355] [1965]

> My mother came home, basically took a broom to me and tried to beat it out of me. I went to school and she went up to the school and dragged me out by the hair and threw me in her car, took me home again and told me not to go anywhere, not to do anything. I was locked in my room—padlocked in my room.[356] [1966]

> With the climate at the place I was staying at I had to go home. By then I was showing I was pregnant and people could see. I don't know what mum did or said I just hung around home and did my best. I cried so much during that time. Every

351 Private individual 20, transcript of evidence.

352 Submission 20.

353 Submission 94.

354 Submission 124a.

355 Private individual 8, transcript of evidence.

356 Private individual 9, transcript of evidence.

> where I went there was shame and condemnation at my situation. I eventually put a silver ring on my finger to say I was married. Birthing classes I was sent to, where all the women had husbands and I was on my own where particularly hard. I did not return to them. I just wanted to hide.[357] [1970]
>
> I wasn't allowed to go out anymore while I was pregnant just stay at home and hide away![358] [1971]
>
> back in my childhood home on the farm, I was now confined to my room forbidden to come out for anything other than eating, a shower or to go to the toilet.[359] [1979]

4.65 One mother's parents took her to a 'Church-run' property in North Perth, but ultimately decided against it:

> As I began to show my pregnancy, "it was decided that I should go away", out of sight. I agreed because I had seen how my parents were trying to hide me from friends and business partners. This just added to my feeling of being a hopeless case. … that evening, it was decided by them, that I should continue to work in my father's office. I would be confined to the office and to the family home. It was a desperately lonely time.[360] [1968]

4.66 In other cases, pregnant women were kicked out of home. Some were sent to live with relatives, others moved in with friends.[361]

> My mother refused to have me remain at home and my father said, "I can't go against your mother."[362] [1968]
>
> Dad was the manager of the [regional town] Hotel and both he and mum were shocked, saddened and ashamed when they found out. They didn't want my pregnancy becoming known, so I wasn't allowed to return to the hotel. Dad had been there since the 1940's. It was where he met mum and where both my brother and I had grown up. It was my home.[363] [1970]

4.67 The brother of one mother was 11 years old at the time she gave birth, and he recalled:

> Given my immaturity I did not take much notice of her growing size (it was played down) and was given a perfunctory explanation at the time of her confinement – She was "*having her ears cleaned out*". We were of British stock, and I guess you just didn't talk about "those things" then. I knew and loved the father – who later married her. They went on to have another 2 children.[364] [1968]

Women were institutionalised

4.68 Inquiry evidence shows that unmarried pregnant women were put in places known as 'lying in', maternity or confinement homes, or other kinds of institutions out of the public eye.[365]

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357 Submission 82.

358 Submission 116. See also Private individual 15, transcript of evidence.

359 Submission 98.

360 Submission 109.

361 For example: Submission 59; Submission 82.

362 Submission 37.

363 Submission 7.

364 Submission 8.

365 For example: Private individual 15, transcript of evidence.

While some mothers seemed to take themselves to and from such places, including those from interstate,[366] generally women had little say.

> Between the doctor and the welfare department and Mum, I was told I was going into a home. The home was Ngala. I do not really know much about anything because I was just told. Like, I never had an opinion. I was just nothing. [367] [1966]

> My father … decided that Ngala was the better option for me for the term of my pregnancy. There was so much societal shame that I had to be hidden away from friends and family. I was humiliated and in a state of shock. … You did not share it. You did not tell. You were shut away. My mum told my neighbours and that that I had gone flatting with a girlfriend. That is how it was. [368] [1967]

> To protect [father-to-be] (he was 21 by then) from being charged by the police as I was under the age of consent, I was sent to Hillcrest … I was locked away, out of sight and the father of my baby was safe from prosecution for sex with a minor because I was hidden away so well. I had no money and nowhere to go.[369] [1968]

> I was 17 and pregnant. At seven months pregnant my Mum took me to Ngala to stay until I had my baby, this was because she didn't want anyone to know I was pregnant.[370] [1979]

4.69 Researchers Swain and Howe found that the isolation of some unwed pregnant women had a punitive effect:

> The mother … faced a mental exile, her reputation intact so long as her "secret" remained untold. Her pregnancy hidden … she was compelled to collude in her own punishment by maintaining her silence.[371]

Disempowerment

4.70 Women in evidence spoke about being raised not to challenge authority, including parents, the religious, senior bureaucrats and medical and legal professionals. One mother who spent time in Ngala reflected:

> a lot of them were like me—young, and I was brought up in Roman Catholic faith, so you did not answer people back. You were quiet; if you were spoken to, you spoke back quietly and basically did not go out to cause trouble. Most of the girls who were there seemed to be very similar to myself. We kept to ourselves pretty much; I think a lot of us kept a lot in.[372] [1969]

4.71 Many forced adoptions occurred at a time when women were socialised not to speak up for themselves, and disadvantaged and discriminated against in general. The lack of supports, the shame that unmarried pregnant women were subjected to, and their isolation from

366 For example: Submission 19.

367 Private individual 9, transcript of evidence.

368 Private individual 25, transcript of evidence.

369 Submission 50.

370 Submission 126.

371 S Swain and R Howe, *Single mothers and their children: Disposal, punishment and survival in Australia*, Cambridge University Press, Oakleigh, Victoria, 1995, p 11, cited in Dr D Higgins (Australian Institute of Family Studies), *Impact of past adoption practices: Summary of key issues from Australian research. Final Report to the Department of Families, Housing, Community Services and Indigenous Affairs*, Australian Government, 2010, accessed 11 June 2024, p 14.

372 Private individual 5, transcript of evidence.

partners/fathers-to-be, workplaces, schools, friends and family disempowered them further.[373] A mother who stayed at Hillcrest concluded:

> We had no power virtually. That is how I have always felt since then—that any of the power that we could have had was stripped away from us. I just did not feel that we had any power to question. That is really how it actually felt.[374] [1970]

4.72 Another mother, who was 20 years old at the time, reflected:

> I was truly alone .... You feel you are powerless to do anything about it. Looking back, I realize I was just too young to know and accepted it.[375] [1973]

4.73 Some pregnant women were themselves fostered, adopted, or state wards who had spent time in institutions, and these backgrounds further reinforced gendered expectations of obedience and generally not 'rocking the boat':

> Adopted and fostered children by nature of the care arrangement often grow up hypervigilant to the needs of others, and knowingly or unknowingly work the system, repeating or buying into narratives they understand others want to hear, because life as they know or want depends on it. I had been in a state of self-preservation since my own fostering and adoption twenty years before in the 1950s, and had grownup understanding that 'parental' love and care in this situation was conditional on my right and good conforming behaviour. [376] [1973]

4.74 For many, it was their first time living away from their family homes.[377] Some were from interstate. Women consistently described being lonely and frightened, with no indication of what would happen next. In a sense they each dealt with their situations alone.

> In dividing the mother from her baby at birth - the family from the mother - the father from the mother and his baby - the baby from its family – it was a case of – "divide and conquer".[378] [1968]

> I felt very alone and afraid and I used to pray to God to help me.[379] [1972]

> Back then I had no idea I was just one of thousands of young women in Western Australia and other states across Australia who were going through or had been through the same experience because nobody talked about it then or after. … At no stage do I recall ever coming in contact with another unmarried pregnant girl in my circumstance either at the Ante Natal Clinic or as an inpatient in the hospital maternity ward prior to the birth of my baby. Afterwards I presumed we single girls must have been purposefully set apart in mixed wards during our confinement in case the association might prove pernicious to our babies' future adoptions.[380] [1973]

4.75 One woman in evidence was disempowered by her state wardship being extended past her 18th birthday because she was pregnant. She stated that:

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373 For example: Private individual 29, transcript of evidence.

374 Private individual 15, transcript of evidence.

375 Submission 124a.

376 Submission 124a.

377 For example: Submission 150.

378 Submission 59.

379 Submission 112.

380 Submission 124a.

> The Child Welfare Department (CWD) increased the age bracket of 18 years old to 19 years old, as I believe they did this to take my baby.[381]

Medical care

General practitioners

4.76 Many women reported seeing a general practitioner early in their pregnancy. Some doctors assumed that being pregnant and unmarried was a problem, others funnelled women into institutions or towards agencies that arranged adoptions.[382] General practitioners also facilitated private adoptions themselves and advocated for adoption to pregnant women and their families.

> Our family doctor conveniently knew of a couple who wanted to adopt a baby. Dr. … also knew [father-to-be]'s family, as the three families lived in the immediate vicinity. He arranged for me to go to the "Alexandra Home for Mothers and Babies", a Mothercraft Nurse training school, where unmarried pregnant girls lived and worked away from the public eye, until their babies were born and adopted out.[383] [1957]

> On the next visit to my G.P., after being informed that I would not be having an abortion, he suggested that he had a couple who were patients in his practice. They were keen to adopt. His explanation to me, was that the wife had lost her first husband and two sons, in a car accident. This second husband was infertile. I thought how sad she must be. She would be an experienced mother. Much better than myself. … It seemed everyone was happy with this, and so it was, that I excepted this Adoption as my atonement.[384] [1968]

> When I found out I was pregnant the Catholic GP at my local Perth clinic immediately referred me without explanation to the Ante-Natal Clinic (ANC) at KEMH. I just presumed without question this was the procedure and place to which first-time pregnant women were sent. I have since discovered it was the primary referral centre for complex pregnancies and high-risk births, and by implication my pregnancy had no doubt been flagged as 'complex'.[385] [1973]

4.77 Some doctors advocated for adoption or alerted authorities to the unwed mother's pregnancy without their knowledge or permission. One mother described being shocked to discover that a private GP she had seen at 5 months pregnant mentioned adoption on his request to KEMH to perform a routine ultrasound. This mother states that in so doing the doctor 'Alerted authorities to a potential adoption baby':

> Records from KEMH include ultrasound request dated 5.8.79 and doctors handwriting includes 'She wants to go through with the pregnancy + possibly have the baby adopted once it is born.' An ultrasound is performed to confirm dates and check for abnormalities. Adoption has nothing to do at all with an ultrasound, there was absolutely no reason for this to be on request. … whose idea was adoption? It wasn't mine, not sure it was Mum's either as I never heard adoption mentioned in the consult. Just like that I had unwittingly entered what I will refer to as 'The System' for that is what it was. A carefully orchestrated process to methodically remove babies from young, single mothers, so they could be

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381 Submission 115.

382 For example: Submission 82; Submission 5; Submission 52; Submission 150.

383 Submission 81.

384 Submission 109. The submission later states that the description of the adopters' circumstances was untrue.

385 Submission 124a.

> adopted to the ever growing queue of adoptive parents waiting in the wings.[386] [1979]

Antenatal care at KEMH

4.78 Women also mentioned receiving antenatal care through KEMH that was adequate but somewhat callous:

> I attended monthly antenatal visits at King Edward and they went to fortnightly when 7 months pregnant. … Doctors were impersonal … The care was okay from memory, that being said, Everything was distanced care compared to later pregnancies; - Referred to as 'a triangle' in any discussion with others. - Called into antenatal visits by number - There was never any idle chat about when the baby comes, it was cold and impersonal. - Compared to my later births the care was substantially different. The most impactful was the absence of any advice about care of myself or preparation for birth being necessary.[387] [1979]

> I had to go to King Edward Memorial Hospital for antenatal check-ups. I was not treated very well while I was there. I was made to feel ashamed. I was humiliated during this time. … A couple of times, I did not show up for appointments because of the way I was treated and made to feel. You are made to feel like a really bad person. … I was 15, a young girl, unmarried and judged[388] [1981]

4.79 Groups of medical students examined some women without prior warning or consent:

> My first medical appointment was booked in KEMH public outpatients. Given that I had private hospital and medical cover, this in itself was quite bizarre and unexpected. … I was shown into a curtained cubicle surrounded by the other patients, and attended by Dr [name] and 6-8 attending students for my first internal examination. This experience was, in itself, traumatising.[389] [1968]

> I did understand at the time that KEMH was a teaching hospital and involved in the training of student doctors and other health professionals but remember on one occasion a group of young male medical students inspecting my swollen belly, the doctor asking them questions that they then discussed among themselves and answered. This was done without my consent and was very embarrassing and humiliating as a young single woman of similar age and status as the medical students. I have since wondered if this practice also applied to married pregnant women[390] [1973]

4.80 One mother saw her initial hospital appointment as the start of the adoption process:

> The manipulation and control began at my first antenatal visit to KEMH and was overwhelming! I was not prepared or advised as to what the examination would involve. I was surrounded by unsympathetic adults wearing clinical attire who clearly saw me as a lesser person, a problem. The curtains were drawn around me and the examination began. I found the attitudes from the nurses and Dr's far more painful to endure than the physical examinations during which time I was

386 Submission 98.

387 Submission 98.

388 Private individual 7, transcript of evidence.

389 Submission 37.

390 Submission 124a.

> instructed, "you won't be keeping this baby will you". I felt powerless and ashamed.[391] [1975]

4.81 Another mother emphasised that she received very good clinical care from medical staff at KEMH prior to and following her child's birth in 1973, including doctors who indicated their concern for the pressure she was under to adopt.[392] However, this person clarified that she was flagged to be under the specialised care of the same doctors due to pre-eclampsia, and thus her medical treatment may have differed from the experiences of women in other circumstances.

Institutions

Institutions for unmarried pregnant women arranged adoptions

4.82 Unwed women stayed in private institutions before giving birth, and in some cases during and after birth as well. The majority of the evidence related to Ngala, which was previously the Alexandra Home. A large amount of evidence concerned Hillcrest, run by the Salvation Army in Fremantle. Catholic institutions, including St Anne's Maternity Home and the Catherine McAuley Centre for Unwed Mothers, were also described. The practices and conduct of the main WA institutions involved in forced adoption are detailed in Chapter 8.

4.83 In some cases, doctors recommended a particular institution, in others parents of the pregnant woman arranged for their daughter's stay. As mentioned, some women travelled from interstate to stay in a Perth institution while pregnant.

4.84 Importantly, these institutions arranged adoptions. In the cases before the Committee, once a woman entered the institution, it was generally understood by staff that her baby would be adopted at birth. Women themselves did not necessarily have the same understanding.

> Matron [of the Alexandra Home] was a formidable, cold person, with a nasty temper and a sharp voice who ran the home very strictly. It was a given your child was for adoption for you to stay at the home and you were never allowed a second chance to go there if you became pregnant again. She also made it clear that my baby was not 'my' baby - there was no way I was going to keep 'it' if I wanted to stay in the home, 'it' was to be adopted out. She spoke as if the babies we were carrying were illusory.[393] [1957]

> I have very little detailed memory of living at St Anne's. I know we were told from the start that this baby was not ours. … I don't remember having a discussion about my choices, adoption was my only option.[394] [1967]

> [At Hillcrest] There was a hospital on site and I soon learned that after a mother gave birth there was an expectation that her baby would be adopted by a married couple and the mother would return to her previous life and pretend that nothing had happened.[395] [1968]

> I was sent to Ngala to await the birth of child, during that time never once was the process and procedure of adoption discussed nor was I asked if that was what I

391 Submission 76.

392 Submission 124a; Private individual 26, transcript of evidence.

393 Submission 81.

394 Submission 52.

395 Submission 50.

> wanted. My parents also never received any advice or counselling as to what choices could be made regarding baby and myself.[396] [1969]
>
> WITNESS: Pretty much all the girls that I spoke to [at Ngala] appeared to be in the same situation as myself. Some had made their own minds up that their babies were to be adopted. Some had been forced into the adoption. Pretty much like me.
>
> Hon SHELLEY PAYNE: And there did not seem to be anyone there who was comfortable making a decision to keep their child?
>
> WITNESS: No.[397] [1969]
>
> It was imperative that one had help. I didn't. Others chose not to marry the father of their child. Mostly the girls I met in that institution [Catherine McAuley Centre for Unwed Mothers] were from over east. We were under assumed names to protect our privacy. It was the done thing. Prospective parents would come to see the nuns and the infants were placed with them after their applications were given the green light. Some, not so lucky ended up in the adjoining orphanage.[398] [1970].
>
> Ngala … nurses and other staff where all about adoption being the only option at my age and best option for child and myself and my family. … I shared a room with another girl who had been their for many months, she was 16, a state ward, and seemed mentally impaired, a lovely girl who had also wanted to keep her baby but had no option to do so and no say in her life either.[399] [1971]
>
> It was just assumed in the background that that was the process and that was what I was doing there. That was the way it was all happening. There was no discussion about it.[400] [1971]

Women reported a broad range of experiences

Conditions

4.85 Many mothers had negative recollections of their time in private institutions while pregnant. Many drew parallels with being imprisoned:

> At 15 years of age, I was one of the younger inmates at Hillcrest … It was a grim existence[401] [1968]
>
> [At Hillcrest] We where all caught up in a program that was only geared to supplying babies to childless parents. We where the carriers only. We where treated as though we had no feelings or sensitivities, they where only found in married people.[402] [1969]
>
> as I was a practising Catholic, my mother and father agreed to send me to the Catherine McAuley Centre for unwed mothers in Wembley Downs it was at the time. This place was the most ghastly thing ever. Behind walls we had a big dormitory. There were other unwed mothers there. It was run by old nuns. … We

396 Submission 47.

397 Private individual 5, transcript of evidence.

398 Submission 19.

399 Submission 94.

400 Private individual 27, transcript of evidence. See also: Private individual 8, transcript of evidence.

401 Submission 50.

402 Submission 104.

> looked after orphans. We looked after children that were mongols and it was so sad to see those kids in this orphanage and these nuns, they treated us and these children dreadfully.[403] [1970]
>
> My mother recalls that the mothercraft nurses, who primarily cared for the newborn infants (awaiting adoption) at Ngala considered them to be subordinates, either ignoring them outright or speaking to them in a disrespectful manner, like they were a drill sergeant in the army.[404] [1972]
>
> Conditions there were awful. There was little difference between Ngala and a prison for us and, indeed, we were viewed and treated as delinquents. … I felt generally unsafe in what was, in essence, a prison environment (we not allowed metal cutlery in case we selfharmed or harmed others), we had no shower curtains in the ablutions area and halfdoors on most of the toilets – and we were observed showering by the (lesbian) house mistress on the premise that we "might start a fight" with each other.[405] [1975]
>
> were we allowed out of Ngala? No! … We were locked in at night, checked on during the night by a torch through the glass window in the door, and during the day we were always watched – just like a prison – even in the showers. The only times I was not supervised was when we had free time in our rooms. I was told that sometimes a few of the girls were allowed to go to the shops with nurses supervising us, to buy sweets or personal care items, but that never happened in the time I was there. When this was questioned, the answer was that they were responsible for us and if anything happened to us, it would be their fault so we had to stay where they could see us.[406] [1975]
>
> My time at Ngala was traumatising. We were prisoners. We weren't allowed to leave, not even to go to the shops. They forced us to hide away and made us feel ashamed of being pregnant.[407] [1979]

4.86 However, some women had neutral or positive recollections of their stay in institutions, as the following examples show.

- One mother, who came from an unhappy home, enjoyed aspects of her stay at Ngala:

  > Going into Ngala, the girls were absolutely gorgeous. We all sort of became friends. There was camaraderie between us. Most of the sisters and the nurses, or whatever they were, were all really nice. Matron was a matron, which was expected, but she was also quite soft at times. [408] [1966]

- Of her stay at St Anne's Maternity Home, another wrote:

  > I lived in a shared room with [another resident]. We made baby blankets and nighties for the nursery. There was a lounge area where we would sit of an evening and lovely gardens to walk around. I don't remember being given any counselling. I also don't remember having any visitors although my sister says she remembers coming to see me.[409] [1967]

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403 Private individual 16, transcript of evidence.

404 Submission 110.

405 Submission 1.

406 Submission 1b.

407 Submission 126.

408 Private individual 9, transcript of evidence.

409 Submission 52.

- About Hillcrest, contributors explained:

> My stay at Hillcrest wasn't the worst place to be. We where all allotted house hold chores which we carried out in the morning and had the afternoon to ourselves. The Salvation Army people who ran the home lived above on the second floor and where reasonably good to us. There was no harsh treatment of anyone.* To them it was a money making business and supplying a demand. One of the staff visited me in KEM [King Edward Memorial Hospital], the only person who did.[410] [1969]

> Everything was regimented—going to bed, meals—by a bell. It would wake us up in the morning, tell us when to go have breakfast, when to go to bed and when it was time to turn the lights off in our big dormitories. [The matron] was not tough. Some of the staff were, like the captains, because it is all very Salvation Army—captain and major. Some of the staff could be quite tough, but she just came across as being—she was not motherly. She was just, I would say, a very practical person. … The actual staff—it all depends which one.[411] [1970]

Shaming

4.87 Women commonly reported being shamed for being pregnant and unmarried during their time in institutions. Adoption Research Counselling Service submitted:

> The women who spent time in homes for Unmarried Mothers speak of being isolated from family, shamed, and humiliated. They also recall having to work scrubbing floors, working in laundries and other menial work. Their memory is one of feeling they were being punished for being pregnant and unmarried. The impact on them has been a sense of shame and worthlessness.[412]

4.88 Mothers' testimony portrays that shame and punishment were built-in functions of some institutions:

> I was almost 6 months pregnant. I was removed from school and they arranged for me to be installed in N-Gala. I remember the sign outside the building that said "A Home for Unmarried Mothers and Unwanted Children". I never felt more unloved, unwanted, dirty or ashamed in my life.[413] [1966]

> [At Hillcrest] Every Sunday we would always have to go to chapel. … I have been brought up in religion myself, but it was like you have to go because you have done this—you have to atone for what you have done.[414] [1970]

> [At Ngala] The nurses were generally dismissive or outright rude to us. When they were rostered to do the bed-time check (patrolling the corridor of our locked ward and shining a torch into our rooms to make sure we were in our beds), they called it "slut duty".[415] [1975]

410 Submission 104. *This submission then states: 'The girls who had chores in the kitchen and in the laundry where treated very harshly by their overseer, as if they had the right to dish it out.'

411 Private individual 15, transcript of evidence.

412 Submission 113.

413 Submission 108.

414 Private individual 15, transcript of evidence.

415 Submission 1.

Pressure to adopt

4.89 Mothers explained that they felt constant pressure from the institution to adopt out their babies. Pregnant women were treated as being unfit for motherhood, and some behaviour described amounts to sustained emotional abuse.

> [Mother's Name] did not talk much about the experience [at Hillcrest] when we met later in life because it was so traumatic to her, but she certainly relayed that it impacted her for the rest of her life. She felt belittled. She was berated for getting pregnant. Look, it was a different time back then in the 1960s. The … nurses … did not treat her very well. She was made to feel that she was incapable of raising a child.[416] [1965]
>
> [At St Anne's] I had been conditioned and constantly told that the baby wasn't mine.[417] [1967]
>
> Matron … who was in charge of Hillcrest explained that losing a baby was the price the unmarried mother must pay for her sinfulness. … Matron … told me that my baby would have to be adopted, but I told her that this would never happen. I didn't care that she shouted at me and told me I was stupid and selfish for wanting to keep my baby and I didn't care that her face turned bright red and that she was so loud and so ugly. I just didn't believe her, even when she told me that keeping my baby would condemn my child to a life of misery and that there were many wonderful affluent people, far superior to anything I would ever amount to, who would provide my child with a glorious life and that this was something I would never be able to achieve. Matron … shouted at me and I did my best to ignore what she said. I heard what she was saying, but tried to mentally distance myself from where I was. … Matron … accused me, of seducing the father of my daughter and of how she had labelled me as a sinner in need of punishment. She also said that she strongly suspected that the father of my baby was a victim of my manipulation and scheming. It was as I observed my [second] daughter [when she reached the same age, 15] that I began to realise that at the time of my greatest vulnerability I deserved kindness rather than the callous treatment I had endured at the hands of the Salvation Army and KEMH.[418] [1968]
>
> There was also the constant pressure from staff of "If you love your baby, you will give them away to a deserving married couple. If you want to keep your baby, you are selfish and you don't love them." The matron of Hillcrest told me that friends of hers wanted to adopt my baby, whatever sex I had, so I was put under extra pressure by her throughout my pregnancy. … It was a constant pressure of being told that we had to give our babies away. You know, we need to give them to a married couple that were deserving of the babies. So there was always on the side this pressure of knowing that we had to. That is how I remember it, yes.[419] [1970]
>
> [Matron at Ngala] said that I would have to start thinking about what was best for the baby, that I would have to put my own feelings aside and put the baby first. Even though I was still so emotionally drained with what had happened in the last 24 hours, I told her I was putting my baby first when I called out for help in my suicide attempt, and that after going through that, I still did not want to adopt my baby, and that in the future [boyfriend] and I were going to marry. Over the weeks I was there I was called into her office quite a few times as she tried to convince

416 Private individual 8, transcript of evidence.

417 Submission 52.

418 Submission 50.

419 Private individual 15, transcript of evidence.

> me to adopt and think of the baby's best future …She seemed friendly. … towards the end there, it got a bit more sterner. You have really got to remember the word "selfish". I did not write all of that in there, but I remember the word "selfish" being used right towards the end. "You can't be selfish."[420] [1971]
>
> [At Ngala] There was never any conversation about keeping our babies or about what support we would receive if we did. Some of the mothers tried to leave with their babies and they weren't allowed. The nuns would take car keys off some of the women so they couldn't leave. At all steps of our time there we were encouraged and intimidated to give our babies up for adoption.[421] [1979]

4.90 Institutional staff lied to their residents to coerce them into consenting to adoption. One witness testified:

> When child welfare came to interview me a week before the birth, the matron who was present told me that [boyfriend] had been named as the father of three other babies that were born at Ngala previously and that I was just one of others before me. I was so shocked, upset and totally devastated at hearing this that I agreed to sign the consent for adoption. Mum was not present then. The matron had not told me this information about [boyfriend] in any of the meetings in all the weeks previously. I found out weeks after the birth that this was a lie when I saw [boyfriend].[422] [1971]

4.91 Contributors who spent time in institutions also mentioned that they were not informed of any options for practical help, housing, or of financial assistance available.[423]

> I would say that if we had of been given any assistance at all or any advice or if we had of been told there was a pension available for single mothers, we might have all had a different outlook on what happened to us.[424] [Hillcrest, 1957]
>
> Over the weeks I was there I was called into [Matron's] office quite a few times as she tried to convince me to adopt and think of the baby's best future. Never at any time was I advised that there were other options—that I could get support from other sources. I was never told that I had other options besides adoption.[425] [Ngala, 1971]

4.92 Further, some institutional staff instructed unmarried mothers-to-be en masse in filling in forms related to adoption and registering their child's birth:

> My mother reports that before I was born, Matron [Name] had Ngala's group of unwed mothers attend a classroom styled session that had each of them complete the required paperwork for the adoption of their child. [Name] gave specific and careful instructions about what to write in each section of each document. For instance, if you did or did not know the name of your child's father, do not include this on the birth certificate document. Mothers were informed to leave this blank … When completing the non-identifying information document … if the fathers'

420 Private individual 23, transcript of evidence.

421 Submission 126.

422 Private individual 23, transcript of evidence.

423 For example: Submission 81a (Alexandra Home, 1957); Submission 6 (St Anne's, 1973); Private individual 23, transcript of evidence (Ngala 1973); Submission 126 (Ngala, 1979).

424 Private individual 20, transcript of evidence.

425 Private individual 23, transcript of evidence.

> details were not known, [Name] instructed mothers to create a false father 'character'.[426] [1972, Ngala]

Visitors

4.93 Some women did not leave the institutions they stayed at, while others were able to leave with family for a day on a weekend. While in institutions, some women received visits from relatives and female friends.[427] However, they were not able to see their partners:

> There was a big perimeter fence and we were not allowed to go near the fence. That was told right from the very beginning to us girls that you are not allowed to go near the fence. One day [father-to-be] had come to the fence and had climbed. I did not see it, but I could hear it—him calling out my name, you know, screaming out my name because he had found out that I was at Ngala. I was told later that they had called the police. The matron told me that they had called the police to have him removed. [428] [1971]

> Were we allowed male visitors? No! – not unless it was an approved person, like a relative. This I remember clearly – the house mistress … said … hanging out with boys was how we got to be where we were, and so only my parents were allowed. I heard stories from the other girls of how their boyfriends were supportive and wanted to be with them but were not allowed in… some had tried to sneak in to see their girlfriends or had tried to call to them through the fence and that was why we were locked in the dormitory at night and why we couldn't go to the area near the fence. So we were effectively cut off from supportive partners and friends.[429] [1975]

> [At Ngala] They kept us away from our support networks, including the fathers. My sister and brother in law would come to visit me but they would not let my brother in law or any men in to visit. Because they didn't want the fathers there. This was very hard for me and for the women there.[430] [1979]

Medical treatment

4.94 Women reported experiences that indicate the ante-natal care delivered within institutions was sometimes lacking:

> A week before my baby was due to be born I went [from Hillcrest] to the clinic at KEMH. I was immediately admitted to hospital due to my high blood pressure. I had not seen a doctor, or even had my blood pressure checked for six weeks prior to my clinic appointment and I remember how concerned the staff at KEMH were about the state of my health, and how puzzled they were that I hadn't seen a doctor for such a long time. I stayed in bed for a week at KEMH.[431] [1968]

> I have seen on my medical records [from Hillcrest], which were pretty sparse, that there were check-ups that I had—that the girls had. I do not remember how many because there were not that many on there.[432] [1970]

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426 Submission 110.

427 For example: Private individual 25, transcript of evidence; Private individual 15, transcript of evidence.

428 Private individual 23, transcript of evidence.

429 Submission 1b. See also: Submission 1.

430 Submission 126.

431 Submission 50.

432 Private individual 15, transcript of evidence.

> An incident I very clearly remember was one night [at Ngala] I was told to wash the dining room floor and questioned it because I was not rostered on for that duty . After I had finished I very clearly remember someone in authority taking my blood pressure . From that night I thought I had blocked out 'time'. I was never told I had had blood pressure up until this time.[433] [1973]

> Lastly – did we get antenatal care. Yes. There was a visiting doctor. (I have the records from Ngala.) … [The doctor] took my bloods and it said my leukocytes were "scant". He said I was 'run down' as I had told him I had nearly fainted a few times when working in the dining room and that is when he asked me whether I was eating properly (I wasn't). I left Ngala before my baby was born so I did then have antenatal care through the public clinic at King Edward.[434] [1975]

Work

4.95 Mothers described working every day to 'pay their way' while staying in institutions, right up until going into labour. Duties included washing, cleaning, cooking, serving meals, clearing and doing dishes.[435] They also extended to childcare, nappy-folding and making baby blankets. These tasks can be seen as punitive considering the context was one in which women were being prepared to adopt out their babies.

> [At Ngala] We were all made to do the laundry duties, folding nappies, do kitchen duties, including washing baby bottles. We were never allowed to see the babies but could hear them crying for their Mother's all night.[436] [1966]

> Our routine was to be up by 7.00 am, beds made, showered and then breakfast. We then all had different jobs to do. I was in the laundry folding sheets, towels, nappies, and young toddlers' clothing. This pulled at my heart strings, knowing what was to come that I was not going to have my child with me. Today the experience of working in the laundry reminds me of "Prisoner", the TV series.[437] [1967]

> [At St Anne's] We made baby blankets and nighties for the nursery.[438] [1967]

> I should have been in my third year of high school, but instead I was in an institution where everyone had to work. No one cared that I ought to still have been at school. There weren't even any books to read at Hillcrest, not a single one. My job was washing the pots and pans after every meal. Enormous pots, with lots and lots of burnt food stuck to the bottom of each pot. It was not easy to get them spotless. Still, I thought myself lucky to have escaped working in the laundry, which was reputedly very unpleasant.[439] [1968]

> [At Ngala] We were expected to actually serve matron and deputy matron. The other nurses helped themselves, but one of my jobs was then to pick up plates and take them to the washing area, clean them and stack them. That was, virtually, three times a day: breakfast, lunch and dinner.[440] [1969]

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433 Submission 150.

434 Submission 1b.

435 For example: Submission 103; Private individual 27, transcript of evidence; Submission 110.

436 Submission 108.

437 Submission 89.

438 Submission 52.

439 Submission 50.

440 Private individual 5, transcript of evidence.

> [At Hillcrest] The girls who had chores in the kitchen and in the laundry where treated very harshly by their overseer, as if they had the right to dish it out.[441] [1969]

> [At Hillcrest] All the girls there had to do the actual work of running the place. … We all had to work to keep that place running. When it came to the Salvation Army Red Shield Appeal, they would take some of us girls who could type to go into the city to type up all the papers and put them into envelopes to be ready to post out.[442] [1970]

> [At Ngala] Most girls worked in the laundry – an industrial-type laundry, hot work/heavy lifting, laundering the bed linen, towels, etc., for the facility. I worked in the kitchen and staff dining room. One of my duties was to serve meals for the mothercraft nurses in training and deliver meals personally to the matron's table. Somewhat cruelly, given our situation, other girls were assigned to work caring and feeding the toddlers who were wards there.[443] [1975]

4.96 No women in evidence reported being paid for the work they performed while in private institutions.[444] One mother described this as exploitation:

> The girls were exploited and made to work. We are talking about eight or nine months' pregnant people working in laundries. It is not practical when you are nine months pregnant, plus it was, of course, work for free. We talk about Aboriginal people and their lost wages. What about the lost wages of the mothers who worked? They kept these places going. … They had them working, and what did they do?—substandard food and you put up, shut up and do as you are told. It was a money-making racket. There are no two ways about that.[445]

Cost

4.97 At the same time, institutions received money for housing unwed pregnant women. Income took the following forms:

- Social security benefits available through Commonwealth legislation that went straight to the institutions:

> [At the Alexandra Home] A government sickness benefit payment partly paid for my board and Mum paid the balance.[446] [1957]

> my Sickness Benefit was paid to Ngala to cover my stay. I am not clear on how this was done – I think I had to sign a form so that my cheque went to Ngala instead of me… that detail of how it came about I can't swear 100% to, I only have a vague memory of being in the office with Matron … and her telling me something to the effect of I should be grateful they took me in. I know I was quite angry that my money was to be taken but I was still told I had to work to "earn my keep", and even more upset later when I experienced how poorly we were treated and how awful the food was.[447] [1975]

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441 Submission 104.

442 Private individual 15, transcript of evidence.

443 Submission 1.

444 For example: Submission 1b; Private individual 5, transcript of evidence; Private individual 15, transcript of evidence.

445 Private individual 14, transcript of evidence.

446 Submission 81.

447 Submission 1b.

- Payments from the WA Government:

  I think the only girls who would have been paid for "by the state" as the CEO [of Ngala] stated, were likely the girls there who were already 'wards of the state' because they had been removed from their homes. (Some girls were very young – I was the oldest at 17).[448] [1975]

- Hospital benefits paid to the institutions for their medical services, which included stays after birth of both mother and child:[449]

  Matron … was furious when I told her of my decision to go to KEMH. She bellowed and her face turned red, as I had seen so many times before. But I wasn't going to change my mind and I didn't want Matron … to be anywhere near my baby. At the time I thought she was so angry because she felt slighted at my choosing KEMH rather than Hillcrest, but years later I realised it was because Hillcrest would lose out on delivery fees and my hospital stay.[450] [1968]

- Board fees paid by the woman herself, family, or fathers-to-be:

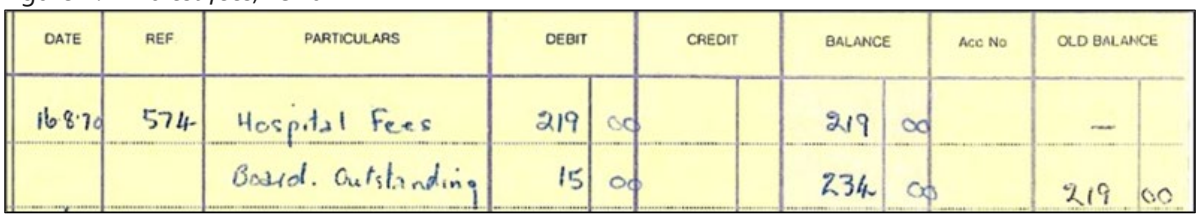
  [Father-to-be] paid the Salvation Army a fee of $11 per week for me to stay at Hillcrest.[451] [1968]

  In my medical records that came there was a board that was paid because after I had my daughter … it says on there "board owing".[452] [1970] (See Figure 4)

  [My mother] had to pay for her own stay, for her own accommodation. She had to pay for my accommodation. That is the only way she knew that I had left Ngala, because the invoices stopped coming.[453] [1972]

  A week after giving birth I went back to Ngala to pay the bill.[454] [1979]

Figure 4. *Hillcrest fees, 1970*



DATE	REF	PARTICULARS	DEBIT	CREDIT	BALANCE	Acc No	OLD BALANCE
16 8 70	574	Hospital Fees	219 00		219 00		—
		Board. Outstanding	15 00		234 00		219 00

[Source: Private individual 15, answers on notice]

4.98 One submitter sent in an excerpt from a Ngala annual report for 1972, showing that 'subsidy' (which included social security) payments received, as well as fees, made up the majority of the institution's income. (Note that not all residents at Ngala were unwed mothers.)

4.99 Contributors to this inquiry expressed anger at the fact they paid to stay at a place that took their children away:

448 Submission 1b, referring to Ngala, hearing on 26 October 2023 (see transcript of evidence).

449 For example: Submission 126.

450 Submission 50.

451 Submission 50.

452 Private individual 15, transcript of evidence.

453 Private individual 1, transcript of evidence.

454 Submission 126.

> What I would like from this enquiry is to be reimbursed the money I spent at Hillcrest on my board and lodgings.[455] [1969]

Interactions with WA government employees

4.100 The following information pertains to experiences mothers had with government employees during their pregnancies.

4.101 In evidence it is often unclear to people affected by forced adoption who a government official was and where they came from: there is confusion between different roles within the Department; between institution staff and Department staff; and between hospital staff and Department staff, especially in relation to those perceived to be social workers. Records show that particular public servants involved in adoption had backgrounds in nursing or in the Native Welfare Department. Present-day information on which Government department employed social workers itself conflicts, as discussed further in Chapter 7.

4.102 However, examples illustrate the coordination, information sharing and crossover between all of the above roles, agencies and workplaces.

Women did not realise they had entered an adoption process

4.103 Similar to women who entered institutions without realising that adoption was assumed, women who interacted with Department and public hospital staff did not understand the future implications for themselves and their unborn children.

4.104 Department staff met with pregnant unmarried mothers in different ways:

- visits to the mother while in an institution
- visits to the mother at her family home
- meetings at the Department offices
- meetings at hospitals, often alongside antenatal appointments.

4.105 While some women contacted the Department themselves, and others were known to the Department as state wards, others are unclear on how the Department became involved.

Department form

4.106 Mothers told the Committee about a form used at their initial meeting with Department workers prior to giving birth that indicated they were seeking and consented to adoption, when this was not the case. The Committee were provided many filled-in examples of these forms, which contributors obtained when seeking their records.

4.107 The form is titled *Particulars to be furnished by Parent consenting to Order of Adoption*. It is subtitled 'SINGLE WOMAN', so does not appear to be a form used for all adoptions generally. The form states 'THIS FORM MUST BE FILLED IN IN THE SIGNATORY'S OWN HANDWRITING'; however, samples provided to the inquiry demonstrate that some Department staff completed the details prior to requesting their interviewees to sign. One mother provided evidence that her signature may have been forged. She also noted that the form states she was unemployed, when she was working at the time.[456]

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455 Submission 104.

456 Submission 98.

4.108 A witness explained that a Department employee first visited her at Ngala in 1971. In relation to the above form, she testified:

> It was signed under relentless coercion and a lie when I was emotionally vulnerable four weeks after my suicide attempt. There was never any mention of other options from the child welfare officer either.[457] [1971]

4.109 Another mother, who was pregnant at 17, described calling the Department to find out more about adoption. The call resulted in a meeting at KEMH with a person who she understood to be a social worker there.[458] This mother explained that she attended a 'meeting … to find out what adoption was and how it worked' at KEMH with a person who she described as a social worker, only to be handed a card to fill in:

> This was so they '*had everything they needed if I went ahead with adoption*'. I filled it in because that's what you do when asked to do something. … If I had to describe this meeting today, it would be that it was a promotional exercise for adoption and pre-work for DCW to obtain my baby for adoption.[459] [1979]

4.110 The form this mother filled in 2 months prior to giving birth is at Figure 5. She reflected:

> use of this specific form, a type of consent 2 months before birth had to be way outside of any guidelines or regulations even if it was to be filled in correctly - there was no child and wouldn't be for another two months.[460] [1979]

4.111 Another witness described a similar experience:

> My boyfriend and I went into the Department known then as Community Welfare in West Perth to find out about the process of adoption. I saw two social workers that day, [Name], and [Name]. When I was there, the social workers decided to interview me for the start of the adoption process. I had only gone there to find out about adoption I was not totally committed. … That day I signed for the Department for Communities "Particulars to be furnished by Parent consenting to Order of Adoption". I signed that and I walked out. I still was in two minds but did not realise I was already on that adoption path and there was no way I was getting off of it.[461] [1981]

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457 Private individual 23, transcript of evidence.

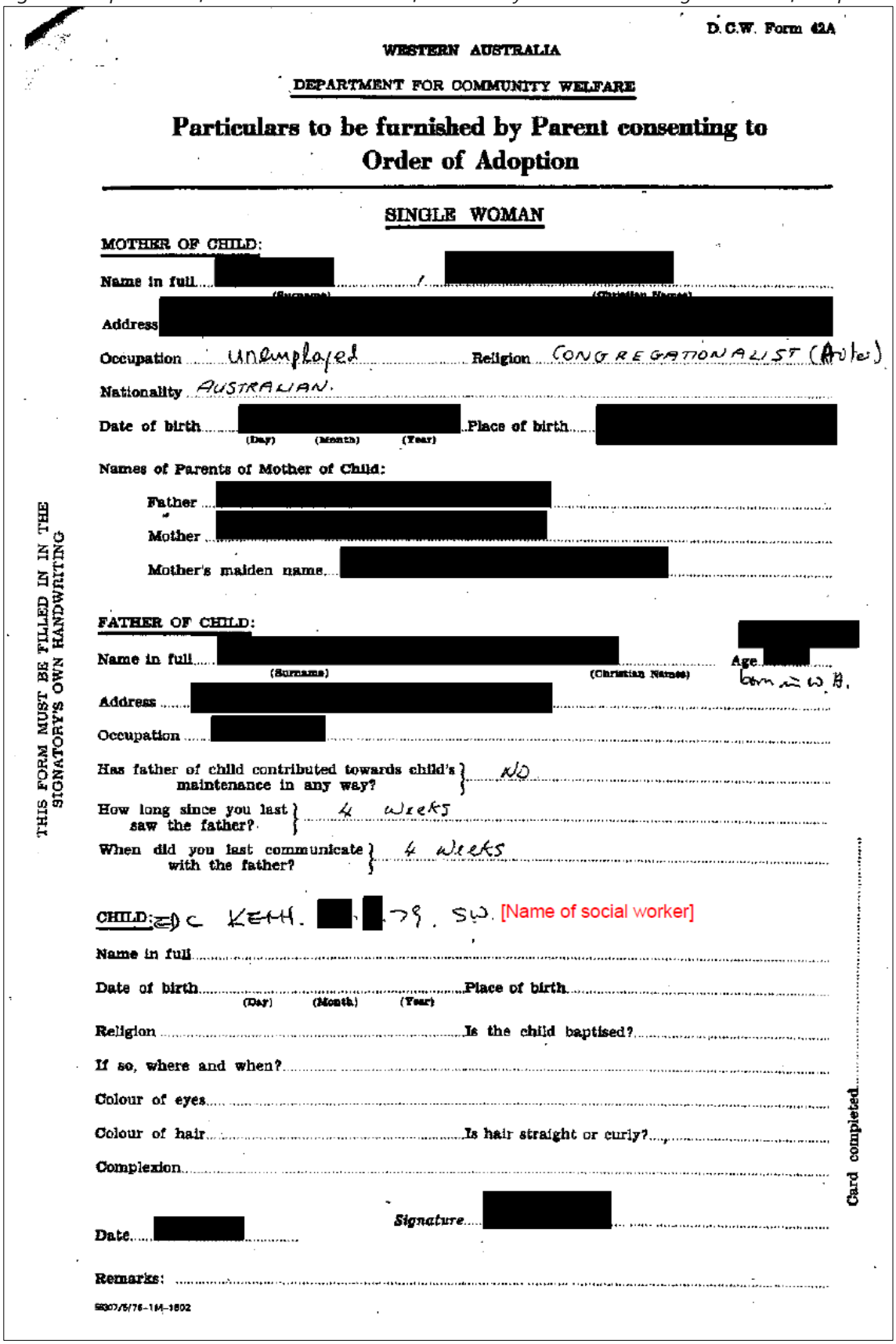
458 Submission 98. This individual was a registered nurse and midwife (see Western Australia, *Government Gazette,* No 33, 12 May 1958, p 910) who was a Family Welfare Officer with Child Welfare in 1966 (see Western Australia, *Public Service List,* No 57, 1967), and was referred to in the contributor's records from the Department as a departmental officer in 1979. However, on KEMH medical records relating to the birth the individual is noted as being from the 'S.W. Dept'. A Department of Health letter relating to the submitter's FOI request in 2012 states that no records of any correspondence from the 'Social Work Department' were located. Correspondence from the Department of Health to the Committee advised that state hospitals employed almoners and social workers from the 1920s, but the annually published lists of government employees only recorded social workers at state hospitals from 1976 onwards.

459 Submission 98.

460 Submission 98.

461 Private individual 7, transcript of evidence.

Figure 5. *Department form: "Particulars to be furnished by Parent consenting to Order of Adoption"*



D.C.W. Form 42A

WESTERN AUSTRALIA

DEPARTMENT FOR COMMUNITY WELFARE

Particulars to be furnished by Parent consenting to Order of Adoption

SINGLE WOMAN

THIS FORM MUST BE FILLED IN IN THE SIGNATORY'S OWN HANDWRITING

MOTHER OF CHILD:

Name in full [redacted] (Surname) [redacted] (Christian Names)

Address [redacted]

Occupation unemployed Religion CONGREGATIONALIST (Aviles)

Nationality AUSTRALIAN.

Date of birth [redacted] (Day) (Month) (Year) Place of birth [redacted]

Names of Parents of Mother of Child:

Father [redacted]

Mother [redacted]

Mother's maiden name [redacted]

FATHER OF CHILD:

Name in full [redacted] (Surname) (Christian Names) Age [redacted] born in W.A.

Address [redacted]

Occupation [redacted]

Has father of child contributed towards child's maintenance in any way? NO

How long since you last saw the father? 4 weeks

When did you last communicate with the father? 4 weeks

CHILD: [redacted] KEITH. [redacted] 79. SW. [Name of social worker]

Name in full

Date of birth (Day) (Month) (Year) Place of birth

Religion Is the child baptised?

If so, where and when?

Colour of eyes

Colour of hair Is hair straight or curly?

Complexion

Date [redacted] Signature [redacted]

Remarks:

Card completed

[redacted]

[Source: Submission 98[462]]

462 The submitter observed several anomalies in the filling out of this form.

Department files

4.112 Internal Department files on 2 of the mothers discussed above show the detailed information that employees collected about pregnant women, fathers-to-be and their relationship at those initial meetings to facilitate adoption. Under notes headed 'ADOPTIONS' the following were recorded:

- details of interview
- intentions of mother regarding the child
- E.D.C. (estimated date of confinement) for birth of child
- place where birth would occur – KEMH
- name of staff member who would liaise with the mother at KEMH
- particulars of both mother and putative father: name, address, telephone number, age, nationality, occupation, education, health, interests, description
- family of both mother and putative father: parents full names, ages, occupations, countries of origin, marital statuses, number of children, their names, ages and occupations
- which of the mothers' parents would supply a supporting affidavit: full name, date and place of birth, marital status, occupation
- 'facts of relationship' between mother and father
- signature or date, and position of the employee: 'FAMILY WELFARE OFFICER, ADOPTIONS' and 'ADOPTIONS OFFICER'.

4.113 The first mother discussed above stated that, at her interview in 1971, she had been 'going on to explain about my future with [father-to-be], and getting married'. The file notes record: 'She wishes the child to be placed for adoption.'[463] The mother testified in relation to viewing that record:

> I thought: that does not make sense to me. Like, "I just want to get this baby out of the way so I can"—and it did not happen like that. So he has written in a way like I had an indifference. … It states so coldly that I wished the child to be placed for adoption, like I was a willing participant with no doubt in my mind and heart. This was so not true.'[464] [1971]

4.114 The file notes of the first meeting the Department officer had with the last mother discussed above in 1981 similarly state: 'I interviewed [mother] regarding her expected child whom she wishes to place for adoption.' Under the heading 'FACTS OF RELATIONSHIP', the officer goes on to note:

> [Mother] and [father] first met about January 1980, and have been keeping company since then. They are still together and they intend continuing their relationship. Both sets of parents are being very supportive toward them and there has been no pressure either way in their decision making. They both feel that at 18 and 15 respectively, they are much too young to accept the responsibilities of parenthood. They impress as a very pleasant, well spoken couple of youngsters who have faced their problem with a great deal of maturity. They see their child going into a loving, caring environment, with parents who can provide all that a child will need. [Father] has asked that he be allowed to sign an affidavit at the

463 Private individual 23, tabled paper 1.

464 Private individual 23, transcript of evidence.

> same time as [mother] as he wishes to associate himself fully with [mother] in her consent.[465] [1981]

4.115 Contrary to this record, the mother submitted that:

> My parents wanted me to keep the baby. My boyfriend's parents banned me from their house as they didn't want anyone to know. My boyfriend's parents suggested adoption and my boyfriend agreed with this. My parents were against this however[466] [1981]

4.116 The file notes from the meeting record the mother-to-be's mother as the one who should supply an affidavit supporting the mother's consent to the adoption, alongside her personal details for the affidavit.

4.117 The first mother discussed above believed at the time that in signing the Department's 'particulars' form she was *actually consenting* to the subsequent adoption of her unborn child, when this was not technically the case. To provide consent, mothers had to sign dedicated forms that were then filed in the Supreme or Family Courts (see examples in section from paragraph 6.105).

4.118 Other mothers did not realise they were being 'signed up' to have their child adopted by providing officers with their information, or filling and signing the Department's form.

4.119 In both cases, Department staff treated this form as an indication that a mother intended to proceed with adoption. The information collected through the interview and the form contained the details that were required by the court forms for a mother to consent to an order of adoption for her child. When women were later presented with this paperwork, the necessary details were pre-filled, so that the mother only needed to sign.

Public servants acted as if adoption was inevitable

4.120 Mothers described feeling they had been picked out by Department staff, and being dealt with in ways that conveyed the adoption of their unborn child was already a 'done deal':

> At the age of 18, I met a nice man and I wished to marry him and have a child. The CWD got involved and everything went wrong from there.[467] [1968]

> Adoption was always the end game in the District Officer's eyes. He was reporting (boasting in my opinion) to a Superior way, way up the ladder in the Department that he had demanded that my Mother make me give up my baby for adoption in my six month of pregnancy. Every action done to me presumed adoption and I, under law, was her sole legal guardian and the only person who could give legal consent. This is stated in their own brochure encompassed in my submission. I was kept completely in the dark the whole journey.[468] [1968]

> Many of us where visited [at Hillcrest] by a Social Worker from the Welfare Department, who was always emphatic that my child would never be mine.[469] [1969]

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465 Private individual 7, tabled paper 1.

466 Private individual 7, tabled paper 1.

467 Submission 115.

468 Private submission. For brochure referred to, see Appendix 6.

469 Submission 104.

> There is an overall theme in the adoption narrative that because the mother was unwed her baby was automatically up for adoption, and adoption as the default choice was assumed prior to and from the moment of birth.[470] [1973]

> Looking back I realise I felt quite scared and way out of my depth in how to deal with the conversation … Adoption was put forward by her as the only possible outcome for my pregnancy. The meeting took place two months before the baby was born and makes me believe this social worker had already determined this baby was to be adopted come hell or high water.[471] [1979]

4.121 Adoption Research Counselling Service submitted that, 'It appeared to be a foregone conclusion that a baby born to a single mother would be adopted even when the mother had not expressed this wish.'[472] Dr Cole referred to this endemic attitude as 'pro-adoption bias'.[473]

Sustained pressure to adopt was placed on women and their families

4.122 Mothers consistently explained that they were put under pressure by government employees to adopt their children. This included both medical and non-medical public hospital staff,[474] and Department workers. At times these interactions appear as harassment.[475]

> My first appointment at KEMH was with a social worker … which had been arranged by my mother. … The pressure to adopt my baby was huge. A WASP baby from a tertiary educated Canterbury woman and a privately educated from father from Sydney's north shore was a highly desirable commodity in the adoption world.[476] [1968]

4.123 Staff applied pressure over prolonged periods, and women describe how they and their family members were worn down by this method.

> I was 19 years of age and fell pregnant. … A woman from welfare constantly visited me before the baby was born pressuring me to agree to give her up. I did not agree and didn't want to give my baby away! When I was in hospital, the same woman came to my room and took my baby from me as soon as she was born, I wasn't able to hug her or feed her. This caused me the most distress I have ever experienced.[477] [1969]

> By now I had little to no money, was emotionally drained and completely dependent on my 25 year old single brother. There was huge pressure on him from both the social worker and our family.[478] [1968]

> [They told me] If I asked my parents to look after the baby, I am ruining their life—not fair because I had a younger brother at home who was seven—and I was just asking too much of everyone. … Not once during this time did anyone ask where my parents were, I was 15 years old and had no legal guardian with me. My boyfriend was 18 years old at the time but not my legal guardian.

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470 Submission 124a.

471 Submission 98.

472 Submission 113.

473 Submission 72.

474 For example: Submission 97.

475 See: Submission 72.

476 Submission 37.

477 submission 18.

478 Submission 37.

> I informed my parents that I would be placing the baby up for adoption. They were not happy and were upset with my decision. They could not understand how I could do this as I was underage. I told them that the social workers told me that as I was the baby's mother, I had the final decision.
>
> One of the social workers [Name] from the Department called to set up another interview with myself and my parents. [Social worker] came out to the house to inform my parents that I had started the adoption process. My parents were asking her how as I was underaged and that they wanted me to keep the baby. [Social worker] told my parents that as I was the mother, I could do this. [Social worker] told my parents that it was selfish of them to make me keep the baby due to my age. My mother said then that she would care and look after the baby until I was able to do so. [Social worker] told them that if they did this, they would ruin my life and the baby's. I was then asked what I wanted. I said I was not sure. I was told once again by [social worker] that "if I loved my baby", I would place them up for adoption.[479] [1981]

4.124 The last example highlights that unmarried pregnant women under the age of majority a) attended counselling unaccompanied by their own parents, and b) had pressure applied on their own parents *not* to support them in keeping their child. (This became relevant for the adoption paperwork – see paragraphs from 6.60.)

4.125 This mother described how she was worn down by being placed in the position of having to choose between professional advice and her own parents' wishes:

> My mother said that she was happy to raise the baby until I was capable or if I did not want to, but she was adamant she wanted the baby to stay within the family. My mother was told that to do that was being selfish and she would ruin my life because then she is forcing something on me that I do not want to do. I sat there just listening to everything and I had those words going through my head of what had been said to me. I had got sick of everyone pressuring me and, in the end, I just gave in. I wanted everyone to go away and leave me alone.[480] [1981]

4.126 Another mother, of a 16-year-old pregnant girl, insisted that she come home with the baby and that she would help her daughter take care of it. However, the submitter described that the Department officer involved:

> demanded that my parents make me give up my child for adoption and that the father of the baby be sent away. He threatened to take me and my child in front of the courts and have both of us declared neglected, if they did not take very good care of me at home.[481] [1968]

4.127 One 20-year-old mother kept her diary from 1973. In it, she had recorded the number of times she saw a social worker at KEMH prior to her birth. The intensity of this schedule raised questions for her now:

> there is no referral to sessions on my hospital file or welfare records of these counselling sessions ever taking place. … I would like to know: was this routine practice; and, if so, who authorised these counselling sessions and for what purpose? … I do not quite know how this whole process happened. I mean, I am just referred from a doctor to the hospital. I go to the antenatal clinic. On the same day, a counselling session is organised. I do not know who is running the counselling sessions. There is nothing on my hospital records that says "refer to

479 Submission 70; Private individual 7, transcript of evidence.

480 Private individual 7, transcript of evidence.

481 Submission 59.

> counselling". The counselling was in the hospital grounds. … I saw the same counsellor all the time. I do not quite know who paid for it. … Looking back, I do not know how it happened. I just went to the doctor and ended up in this, and I just presumed it was normal; I presumed everyone who was pregnant saw a counsellor and went to the clinic. And there were five of these appointments over a four-month period.[482] [1973]

4.128 This mother also recorded attending 3 scheduled meetings with a Department welfare officer in Havelock Street, West Perth. She notes:

> Two were three days apart two-three weeks before the birth where information about me and the father of my child was routinely collected and the adoption process explained. Welfare records and a diary entry confirm at this first meeting social and medical details were collected and a background compiled so that my baby could be 'matched' with suitable adoptees. This meeting occurred four days after my fifth and final meeting with the social worker at KEMH and five days before I was admitted as an inpatient … until my daughter was born[483] [1973]

4.129 The father-to-be was also present that day, and the Welfare officer's report notes that he 'will sign consents'.[484] [1973]

Women were brainwashed, shamed and intimidated

4.130 Contributors explained how government workers employed 'stand over tactics'[485] to facilitate the later removal of their babies for adoption. Even for mature mothers, and especially for teenaged mothers, there was a power imbalance between them and the staff that engaged with them and their families. Mothers demonstrated that they were acutely aware of this:

> I was never angry, upset or disagreeable during these appointments in case the social worker thought I was emotionally unstable and unfit to be a mother. … Possibly by expressing little emotion, they likely assumed I was an unloving and uncaring mother - as they had already done by identification. [1973]

4.131 During interactions with public servants, women, and their families, were consistently and repeatedly given messages reinforcing adoption.

> A representative from the Child Welfare Department … contacted me and arranged for regular meetings. … the focus of our conversations was always on what was best for my baby and giving him up for adoption. These visits were emotionally devastating.[486] [1970]

> I was then put in contact with the welfare department and I had a lovely lady—well, until I read her notes, she was a lovely lady—who I used to go and visit on a regular basis, convincing me … that it was going to be the best for the child and for myself, which I did not agree with because I had very good maternal instincts, but they convinced me—"Have this baby, then you can come back to [regional town], nothing has happened, just go on your merry way." So, consequently, I did as I was told, and was getting it drummed into me on a regular basis that it was "For the best, for the best, for the best". … We literally, in a roundabout way, had

482 Private individual 26, transcript of evidence. See also: Submission 124a.

483 Submission 124a.

484 Submission 124a.

485 Submission 3.

486 Submission 56.

> our kids stolen from us. We had no say in the matter really, because if you get brainwashed, you will do what you are told to do to[487] [1970]
>
> [Following first KEMH antenatal visit] I was ushered to a social worker within the facility who echoed the same sentiment as her colleagues and the coercion continued in that order for the remainder of my pregnancy and beyond. The powers that be at the time saw me as an unfit mother and the system was far more powerful than a 16 year old unsupported pregnant teen could ever be.[488] [1975]
>
> As the [initial] interview progressed, I was told that I was too young to care for a baby, unmarried and did not have a job so how would I support the child financially … I was told by one of the social workers over and over again that if I kept my baby I would ruin my life, the baby's life, and my boyfriend's life. It was then reinforced with "if I loved my baby", I would place them up for adoption. It was also reinforced that a married couple were in a better position to care and financially raise my child where as I as a single parent was not. The whole process made me feel ashamed, judged, and worthless. All I could think of is if I kept my baby, I did not love them, and I would ruin many lives. This was a lot of pressure placed onto a 15-year-old.[489] [1981]

4.132 The mother who kept her 1973 diary recorded the kinds of things she was told and the physical and mental impact this messaging had on her in detail. Excerpts from her entries are reproduced in the box overleaf.

487 Private individual 16, transcript of evidence.

488 Submission 76.

489 Submission 70.

Case study: the messaging of forced adoption

"At the time of my five scheduled meetings between January-April 1973 I was alone and unsupported, afraid, vulnerable and battered with the idea that I had no choice but to surrender my child.

Varying degrees of coercion, abuse, control and reliance characterised the relationship between me and those responsible for my care…

At no stage during these sessions did the social worker asked me whether I wanted to or should or could keep my baby.

They had one mantra and that was I had to do the right thing by my baby.

As I remember it, the unvarying narrative from my allocated social worker went something like this: If you place your child for adoption it would make a married couple very happy, because they are unable to have children. Reassuring me I could have my own children if I wanted them later on. It was not hard to get me to believe that adoption was the answer - pictures of an eager couple ready to give my child all the things I was told were important – respectability, two parents, and financial security. Should I decide to keep my baby - a lifetime of difficulties raising a child unsupported, the stigma of my child being illegitimate, a diminished social life and no potential in future marriage stakes.

I have since come to know that 'normalizing' the adoption decision in this way was a common tactic used by social workers at the time to desensitize us to cruelty and suffering they were about to inflict on us by taking our babies. If my allocated social worker knew or had doubts about what she was doing, she never showed or expressed it. Possibly she was under hospital instruction and for her own workplace self-preservation did not intervene.

At times I struggled to find the right words to express the feelings of anxiety and trauma I was experiencing. I acknowledge this in a diary entry in January 1973, after my first outpatient visit and social worker meeting at KEMH three months before my daughter was born "Was very depressed. Life seems so hopeless … I wish I could write – I'd love to be able to express what I feel …" Tellingly, the discussion about adoption and 'doing the right thing for my child' had already began at this point. I use the same word 'confused' over and over again during these three months in my diary, indicating I knew something was not right, but I was young and at a loss to understand what and did not have the words to explain it.

These sessions stopped after I was referred to the office of the Department for Community Welfare approximately two weeks before my daughter was born and I effectively agreed on adoption as the 'right' choice.

I record in my diary the day after the meeting that 'I had not slept well' that night. By the following day I was feeling unwell and likely suffering what was later diagnosed as a hypertension headache brought on by the stress and anxiety: 'Went to bed and slept off migraine'. Fortunately, I had a clinic appointment the following day with my regular ANC [antenatal clinic] doctor and he was to subsequently admit me to hospital two days later. Immediately after the clinic appointment that day I had a second appointment scheduled with Community Welfare. The stress of that meeting likely caused my symptoms to worsen significantly overnight and the following day: "Didn't feel well when I woke up …. Had a migraine again so went to bed early"."

[Sources: Submission 124a; Private individual 26, transcript of evidence]

4.133 Dr Cole's research states that the 'counselling' women received in the forced adoption era was 'coercive and shame-based', and constituted 'brainwashing':

> to ensure the mother felt disentitled to her baby … even though it was known, in that sphere of time, that pressuring a mother to relinquish her infant caused her major mental health problems … They were positioned in an inescapable trap … Captivity, whether physical or psychological, is a key dynamic in learned helplessness and predisposes one to complex PTSD.[490]

4.134 Mothers also described being questioned and shamed by Department staff:

> The threat of 'The Welfare' questioning you [while in the Alexandra Home] was extremely frightening as they interrogated you to learn if you had done 'it' too many times which meant you'd be put into a home, generally the Sisters of No Mercy's " Home of the Good Shepherd", until you were eighteen. Totally inappropriate and immaterial voyeurism? It was obvious that they had been sexually involved with a male, so why the necessity for detail? Another fear was that your boyfriend could be charged with 'Unlawful Carnal Knowledge' then have to face Court and possibly gaol. [491] [1957]

> I had not had any ante natal care and was around seven months pregnant when I attended the King Edward Memorial Hospital in Subiaco. I was sent to the Almoner who interrogated me, humiliated me: and insisted my baby would be adopted. I knew after this visit to the Almoner I would have a difficult time keeping my baby.[492] [1965]

> There was always talk amongst the girls that they were going to keep their babies and no-one could stop them. But the welfare department had their own ideas, and we were told that we had no right. , We were told that we were unmarried and therefore could not look after a baby. That we were disgraceful and promiscuous and should be ashamed of ourselves for getting into "trouble". I learnt a lot of new words in there.[493] [1966]

> The social worker there [visiting Ngala] was a real tyrant! Demanding to know how many men I had been with and so many more shocking questions that I refused to answer.[494] I felt humiliated and insulted by some of her questions and by her abruptness toward me.[495] [1969]

> The intrusive nature of our past and non-existent current relationship was discussed during this session and as I recall in my diary entry on that day was extremely distressing[496] [1973]

4.135 As in the example at 4.126, women and their families were also intimidated and threatened.

> [Was told by Department social worker] If I did try to find or see her I would be in a great deal of trouble for disturbing the happiness of a loving family. It would be

490 Submission 72.

491 Submission 81.

492 Submission 73.

493 Submission 108.

494 Submission 103.

495 Private individual 5, tabled paper 1.

496 Submission 124a.

> against the law for me to do so. All of these threats where quite frightening.[497] [1969, Hillcrest]

Parents-to-be were sidelined

4.136 Department staff spoke to family members without mothers' knowledge, dismissed mothers, and ignored parents' intentions of raising their child:

> it became evident after a couple of visits that [Department officer] had been speaking with my father[498] [1970]

> was taken into the Govt. offices to arrange an Adoption. … I was interviewed by a woman… I remember her saying that when my baby was born he would go first to an orphanage for some time, while they found "a married couple". I felt completely powerless. The interviewer spoke directly to my mother and on my questioning, as to how long my baby would be in the Orphanage, I was told that this was not my concern.[499] [1968]

> I was extremely afraid throughout my pregnancy although I was looking forward to having my child and raising my child with her father when we were allowed to marry. We were to announce our engagement on my sixteenth birthday in April. … The district officer knew that my partner and I wished to keep our child and that my mother would support me, however, he still threatened, demanded and intimidated my mother. He visited and could see that we had a good, clean home in a nice suburb. He knew that I had excelled at school and had won a commonwealth scholarship. … My own personal records show that the officer (monster in this instance) was demanding my baby be placed for adoption, whilst I was only in my sixth month of pregnancy and she was still growing in my womb. This was despite him being told that it was our intention to marry and raise our child.[500] [1968]

4.137 One mother in evidence attended an interview with the Department with an abusive partner. He was the father of the child but lied about this at the time. The Department were complicit with the mother being sidelined by this partner, proceeded with the interview and, ultimately, the adoption.

> The department did not actually interview my mother to determine the suitability of my adoption like they were supposed to because she was not allowed to speak. My records show, and this is supported by my mother's testimony, that a man accompanied my mother to her interview. … He would not allow my mother to speak or answer any of the questions that they were asking her. He was very controlling and he dictated to them what needed to happen. They had every chance to put a hold on the adoption on account of this, but they did not and they processed it anyway. The department themselves record the interview as being "difficult" because of him, yet they let someone who (to them) had no legal right to request or insist I be adopted dictate what was going to happen to me against my mother's will.[501] [1980]

497 Submission 104.

498 Submission 56.

499 Submission 109.

500 Submission 59.

501 Submission 152.

Staff gave misinformation and withheld relevant information

4.138 Public servants gave incorrect information in relation to the nature of adoption under the laws at the time. Of her experience in 1979, a mother said:

> False information was given in the only time I asked for information about adoption. I was told that I could change my mind at any time until my baby was 5 years old in a perversion of an open adoption, a model that was coming to the fore as the preferred means to secure babies in a time of growing demand and a dwindling supply. I was a naïve country girl that did not know how the mills of gaining babies for adoption operated and I thought this could be an option and agreed to consider this. At the same time I was told if I did agree to adoption my child would only be given to a poor couple who couldn't have babies of their own to raise and they would return 'the baby' when 'it' was 18 and it would be exactly the same as you bringing up the baby, but better. And, the baby won't know any difference at all - we match your looks to the people who take on the baby. This could not be further from the truth that adoption really was. Every time I disagreed or said adoption didn't sound good this person got angry. I remember pointing out, that it's not right to pretend the couple were the real parents, the baby would know and they couldn't just do that and think it was OK. (Such a sick philosophy. I[t] was important to me, of course I would be important to my baby!) I also explained how I knew that Adoption does not guarantee two parents. I know people who don't have two parents that are adopted, their father was killed in an accident and the man I was working for had two adopted boys but him and his wife were separated. When I kept saying adoption didn't sound like a good idea, this person would say - But for 5 years you can get the baby back. 5 Years - That has to be the biggest fattest lie ever told! I didn't know this was a loose and perverted concept of open adoption, this person persisted with this lie knowing full well closed adoption was the only form of adoption in 1979.[502]

4.139 Women were also given untrue information about the financial assistance available. The same mother explained:

> Mum also asked what benefits would be available, that is about the only thing I remember her asking. The social worker said I could only get would be special benefits and that was only for 6 weeks after the baby was born. … There are no excuses for providing such flawed advice. Supporting parents benefit was well and truly available, the responsibilities of a social worker are to advise of social support availability. She failed big time but if in the social worker's mind plan was to remove the baby all along, this information would have been correct.[503] [1979]

4.140 Another mother had a similar experience 2 years later:

> I did not know at the time there was a single parent pension available. I was told I would have to leave school get a job that I was placing a lot of pressure on my boyfriend by keeping the baby. If I asked my parents to help this was selfish of me as they had already raised their children. How due to my age could I possible raise a child, care, love and support the baby. The Department never offered any other support from other agencies or counselling so I could make an informed decision.[504] [1981]

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502 Submission 98.

503 Submission 98.

504 Submission 70.

4.141 As discussed further in Chapter 6, women were told things about the people who would adopt their children that they later discovered were not true, both before and after giving birth, including by government employees. For example:

> At our last session [the social worker] told me my daughter was going to be placed with a professional couple who had two sons and who frequently travelled overseas. I was so excited for her - but it was all lies. [505] [1973]

> Even when still in Ngala, I was interviewed by women who came to the home, who I was told were social workers. They also never mentioned what help, if any, I could receive to enable me to keep my child. The discussion was only to find out a bit about me and the birth father so they could "match" the baby to the prospective parents. I asked if I had any say in what type of parents she would go to and I was told yes, I could. I believe this was to mollify me at the time and so let me believe I was doing the best thing, considering my request was totally ignored. I said I had done very well at school and I believed my child would also be intelligent and do well in the right environment, so I wanted her specifically to go to a family who valued a good education and could provide the child with this, a chance I hadn't received myself. The assured me that they would. As it turned out, she went to a couple where the mother was a stay-at-home housewife and the father was a truck driver, living in a low socio-economic area.[506] [1975]

4.142 Lastly, WA government employees did not give mothers crucial information about:

- other care arrangements available[507]
- what was involved in arranging an adoption[508]
- options for practical help[509]
- financial assistance available[510]
- applying for maintenance from the father[511]
- legal rights and seeking advice or representation[512]
- possible impacts of adoption on themselves and their baby.[513]

4.143 Accordingly, one mother described her interactions with the Department like this: 'What we asked about adoption was avoided/ Nothing important got advised or discussed'.[514] [1979]

4.144 Another told the Committee: 'One option I found out later was foster care. I could have had contact. I just needed time to grow up.'[515] [1964]

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505 Submission 124a.

506 Submission 1.

507 Private individual 21, transcript of evidence.

508 Submission 98.

509 Submission 1; Submission 50; Submission 124a. The Committee received only one indication that women who saw social workers at KEMH were provided any practical assistance: 'KEMH found me a job as home help which was not pleasant and the doctor told me [Name] had to let me rest more as I had high blood pressure.' (Submission 22 [1966])

510 Private submission; Submission 1; Submission 20; Submission 59; Submission 124a.

511 Private individual 22, answers to questions on notice.

512 Submission 20; Submission 98; Submission 124a.

513 Submission 72; Submission 98.

514 Submission 98.

515 Private individual 21, transcript of evidence.

4.145 One mother summed up:

> the adoption of my daughter was forced because both institutions [KEMH and the Department] failed to provide by omission access to appropriate support, assistance and services that would have enabled me to keep my baby. No one asked: How are you feeling? Are you sure about this decision? Do you know there is financial assistance available to you in regard to wage relief and housing? How can we help? … During these meeting there was no mention of state benefits available to single women like me before the introduction of the single mothers' pension later that year. I had worked full-time right up to my admission to hospital trying to save enough money to support me and my daughter, but not one person made me aware I would qualify for available state assistance, or the Commonwealth Single Mothers Benefit about to roll out a month after my baby was due, in July 1973. Even though it would have benefitted me and my child and kept us together. The only talk was of adoption and how it was in the best interests of my yet unborn child.[516] [1973]

Women were not given any alternatives

4.146 As a result of the practices employed by government employees, women were left believing that they had no avenue to pursue other than adoption.

> While, I believed that it was wrong, and went against my wishes, I was led to believe that adoption was the only alternative for my baby by the social worker and my family.[517] [1968]

> I don't consider I was forced, per se, to give up my child for adoption. However, I was coerced, bound by attitudes and, quite simply, given no choice.[518] [1970]

> There was no suggested alternative to adoption … Sitting in the Office of Adoptions and feeling under constant duress to 'relinquish' I came to believe by omission I had no choice. [519] [1973]

> Not once during this interview was, I informed of other options only adoption was best. … Adoption was strongly enforced and was the only option offered to me to consider.[520] [1981]

> this was a time of contraception, abortion was easy, what happened to those 30 of us that let us on this path. At the time I thought I made the right choice, I had no guidance , no counselling , just a six week cooling off period, technically I was an adult, 19, I didn't even know the process, just told my doctor, I think I had 1 meeting with a person from community services, Mr [name] I think, then 6 weeks later I had to go to an office in West Perth[521] [1981]

Adoptions consented to before birth

4.147 The inquiry received examples of women signing paperwork consenting to an order of adoption being made for their yet-to-be-born child. A mother who gave birth in 1964 signed when she was 6 months pregnant, and got married at the same time. Of that day, she recalled:

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516 Submission 124a.

517 Submission 37.

518 Submission 7.

519 Submission 124a.

520 Submission 70.

521 Submission 5.

> Before signing the adoption papers, I queried if maybe I could keep my child, the Welfare said: the couple we have ready to take your child have $3000,00 in the bank and a house. What can you possibly offer this child?!! That just added to my shame and worthlessness I felt about myself.[522] [1964]

4.148 Another was made to sign consent for adoption before leaving Ngala to receive medical treatment:

> Before I left for King Edward Hospital, I was forced to sign the adoption papers at Ngala. I guess they thought I would change my mind.[523]
>
> I had high blood pressure. … Before I left for hospital, [Matron] made me sign the adoption papers. I was hesitant at the time, but I felt pressured.
>
> The CHAIR: Was it ever explained what you were signing and what your rights were?
>
> [WITNESS]: Not about rights at all but I had to sign it before I went into hospital.
>
> The CHAIR: And if you had refused?
>
> [WITNESS]: Look, I was very naive then. You did not really speak up to authority. I was in there because I felt I had done wrong and it was sort of like a punishment. No, I did not question.[524] [1967]

The mother-child connection

Relationship began in-utero

4.149 Adopted people were present through all of the experiences relayed above. While navigating these things, mothers told the Committee that they were connecting with, and connected to, the children in their wombs. For example:

> I was supposed to forget the baby I felt growing and moving in my body, that I talked to each day.[525] [1967]
>
> I consoled myself with daydreaming about my baby.[526] [1968]
>
> I used to play certain classical music at home when I was pregnant and I played it to her—or to myself as well as her—all the time. After we met … I played some of the other things that I used to play when she was in the womb and she recognised them. That was actually amazing for me—to think that she could remember. All those things had a deep impression on her.[527] [1969]
>
> Old friend from school came round to visit with me and seemed like I was on show. Or I would meet some friends in town and I felt on display hey look shes pregnant. It was not a happy time. Poor baby had not many happy vibes coming from his mum. I did used to rub my stomach and talk to him so hopefully something good crossed into his spirit.[528] [1970]

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522 Submission 20. See also: Private individual 21, transcript of evidence. This mother was not clear whether she signed adoption papers through the Department.

523 Submission 89.

524 Private individual 25, transcript of evidence. See also: Submission 110.

525 Submission 52.

526 Submission 50.

527 Private individual 5, transcript of evidence.

528 Submission 82.

> How do I begin to describe or even explain what has happened over the last 9 months. My emotions were mixed with love, happiness, sadness and fright. … I remember you when you were so much smaller. Oh boy could you kick, and kick a lot. But that only reminded me that you were alive and growing with so much love.[529] [1972]

4.150 Dr Cole submitted that, 'Bonding begins in utero. That a pregnant woman has a developing and intense relationship with her unborn child has been known by women since time immemorial.'[530]

4.151 Strange and hostile environments, confusing encounters, lack of support and information and ill-treatment took their toll on pregnant women, and this tension was also felt by their babies. The same researcher stated that a pregnant woman's stress can impact on the brain development of her child, and that 'Neuroscience has proven that maternal distress causes foetal distress'.[531] An adopted person submitted:

> Our baby body was subjected in-utero to everything our mothers experienced in the hospital and mother/baby homes; her physical and mental stressors, the medications she was dispensed and the medical procedures which birthed us into the world. We were directly impacted by our mothers' experiences[532] [1972]

Women wanted their babies

4.152 The Committee received significant evidence that women were attached to their unborn babies, wanted to raise them, and strived against the odds to keep them.[533] For instance: one mother described working 2 jobs through her pregnancy to try and earn enough to support herself and her baby.[534]

4.153 While some women prepared for the future they wanted, others told of how they constantly tried to figure out how to keep their children. For example:

> We worried and planned together, wanting to marry and keep our baby. … We wanted our child despite the inopportune timing … We were still planning ways we could take our baby home and manage by ourselves, until the end.[535] [1957]

> in the home [Ngala], the girls talked about this a lot because a lot of them wanted to keep their babies. In fact, almost all of them wanted to keep their babies. I cannot remember any one of the girls that I was there with saying to me that they wanted to adopt their children, that they wanted them taken away, except one lady who was 29 years old. She had come over from South Australia and she was a schoolteacher and she came over to have her baby to get rid of it, and she was going back to work. She was the only one I knew who said that she was not keeping her baby. All of the rest of us thought we were going to be able to keep our babies. None of us knew that we were going to be so forcibly forced to give them up. We all wanted to keep our babies. [536] [1966]

> My plan was to keep my baby and as soon as I turned 16 to marry [father-to-be]. My baby was due in November and I would turn 16 in January. I thought that if

529 Submission 112.

530 Submission 72.

531 Submission 72.

532 Submission 110.

533 For example: Submission 59; Submission 116a.

534 Submission 124a.

535 Submission 81.

536 Private individual 9, transcript of evidence.

> only I could find someone to help me for those few months I would not lose my child. … I truly believed that somehow my parents would relent and allow me to bring my baby home, or that I would come up with some sort of a solution where my baby and I would stay together. I was determined that my baby would have a wonderful life with me. … There was no doctor at Hillcrest and babies were usually delivered by Matron … or a nurse who was on duty. My experience with Matron … led me to form the opinion that she was a cruel woman and I didn't trust her. Also, I knew she wanted to take my baby and I didn't want to give her the opportunity to do this. Finally, I had an idea. … I phoned KEMH and arranged to attend their clinic. Then I told Matron … I had been dreading doing so because I thought she probably wouldn't be happy about my plan, and she wasn't. … I still had not arrived at a rescue plan for my baby and was all too aware that time was running out. It was all I thought about.[537] [1968]

> I moved in with my married sister and her two children and set up my room for the baby to arrive. I had all of the necessities for a newborn.[538] [1968]

> I was looking forward to raising 'junior', as we called the baby and we often laughed at the baby's antics in my belly.[539] [1979]

4.154 One mother described how despair at having to adopt her child drove her to attempt suicide, and love of the child prevented her from following through with it:

> I continued to go to work at the GPO in Forrest Place and telling my co-workers that I was going to keep my baby and that Laurie and I were going to be married when I was older. Between the sixth and seventh months of my pregnancy I had started to secretly buy baby clothes and hid them under my bed. One day dad had walked around the corner of the house as I was showing my friend some of the baby clothes I had just bought. Dad went ballistic as my friend left and screamed at me that I would be living out on the street, trying to look after a new baby, and no money to feed and clothe it, with no-one to help me, and that he and mum were separating. He kept going on and on about how I would not be able to work and look after a little baby on my own, and that the only solution was to adopt it. He then left. There was not anyone else at home, and I was so despairing of the thought of giving my baby away, I could not even bear the thought of being separated from this life growing inside me. The feeling of hopelessness and being all alone was overwhelming. Life was not worth living if I did not have a future without my baby in it. It was at this point when I went into the bathroom and removed the razor blade from my dad's shaver and slashed both my wrists several times, very deeply. As I looked at all the blood spurting into the basin, I asked God to take me quickly and free me from my breaking heart. Then, suddenly, I got frightened, because I wanted to kill myself but I realised I could not kill my baby. I had not thought about those consequences, and I realised that if I killed myself that I would also be killing my baby. I had to protect my baby, so I immediately went out the back and called out to our neighbour for help, who came and called an ambulance.[540] [1971]

4.155 Women went into labour in the institutions and states described above. Mother's experiences of giving birth, adopted people's experiences of being born, and their separation for adoption are the subject of the next chapter.

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537 Submission 50.

538 Submission 115.

539 Submission 98.

540 Private individual 23, transcript of evidence.

FINDING 1

During the 20th century in WA, some unmarried pregnant women were funnelled towards adoption against their will – sometimes without their knowledge. Women wanted to keep and raise their babies once born. Information relevant to them was withheld, or they were misinformed. Women were pressured and coerced into agreeing to adoption. Pressure was also exerted on fathers-to-be, and the parents of both pregnant women and fathers-to-be.

CHAPTER 5
New mothers and babies

5.1 This chapter documents the experiences of mothers and babies during and immediately after birth, and following their separation. Mothers were prevented from accessing their newborns, and not told, or not told the truth about, where their babies were. Some adopted people were institutionalised for extended periods as infants, unbeknownst to their mothers. The chapter also discusses the legal guardianship of infants, and examines the functions and negative impact of forced adoption separation practices.

5.2 The names of relevant institutions and the hospitals where births took place are noted, and the roles they played are discussed separately in Chapter 7 and Chapter 8.

Labour

Women were not prepared for labour and birth

5.3 With one exception,[541] contributors consistently described that they did not know what to expect when they went into labour and had little understanding of the birth process.[542] They explained that neither family members, GPs, institution or hospital staff equipped them with any information to empower and give them confidence going into birth.

> In the early days at the home, Matron [name] said that it would be explained what to expect closer to the time of the birth, but I heard nothing from her except to criticize or reprimand and no advice or information was given by the medical staff at the Outpatients Clinic who supposedly explained to the girls, as expectant mothers, what to anticipate up to and after birth, but they didn't either, so I remained ignorant until the end: a distressing shock.[543] [1957, Alexandra Home]

> As the time for my baby to be born got closer I grew more and more frightened. I had heard so many terrible stories of other girls' experiences. I didn't know anything about giving birth except that it was extremely painful. There were times when I would go to bed and cry. I didn't know what to do.[544] [1968, KEMH]

> I only had a few visits with the GP involved, neither information nor instruction was given to me about giving birth. [545] [1968]

> I don't know how I got through those months. I was frightened and confused with limited information on what lay ahead. … The day came when I was admitted to St. Anne's to be induced. I really had no idea what was going on. I just did as I was told.[546] [1970, St Anne's]

5.4 One mother surmised that unwed pregnant women were intentionally left in the dark in relation to their births so that it would be worse for them:

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541 Submission 82.

542 For example: Submission 76; Submission 109; Submission 81; Submission 103; Submission 76; Private individual 103, transcript of evidence; Submission 7; Submission 50; Submission 59.

543 Submission 81.

544 Submission 50.

545 Submission 59.

546 Submission 7.

> by not providing any information whatsoever about labour, the staff made sure birthing was a very unpleasant experience.[547] [1979, KEMH]

5.5 Mothers related that they dreaded going into labour because they realised they would then lose their child:

> I was in labour and working and I did not realise; I thought I just had a bellyache. I was working in the dining room and the deputy matron walked over to me and asked me if I was okay. I said, "Yes", and then I got a good cramp. She said, "I think we'd best go down to your room." She sat with me for a while with her hand on my belly, timing contractions, and she said, "No, you're not okay. You're in labour and we're going to hospital." I felt like that was the end of the world because finally this child moving inside of me for so long—she was part of me and she was part of her father, who I loved very dearly—she was going to be separated from me. The hardest moment of my life was getting into that car and going to that hospital[548] [1969, Ngala to KEMH]

Women were induced unnecessarily

5.6 Women told of being induced to give birth.[549] While some had hypertension, for others it is not clear from their own accounts or from their records whether there was any medical basis for induction.

> Ultimately a decision was made to induce the birth because of my lack of apparent cooperation.[550] [1973, KEMH]

5.7 One mother was induced on the basis of a calculation error:

> not based on any foetal distress or excessive size … My birth mother was admitted to KEMH for "ARM (Artificial rupture of membranes) for post Maturity" (see attached summary of labour). Induced labour is often more painful. … Before being induced my mother remembers being examined in a four bedded room and screaming with pain. After the medical team left the other three patients in room expressed their horror at how she was treated. … Why an incorrect obstetrics assessment was done on my naive, uneducated Mother, that determined an incorrect … due date. Resulting in … my mother being induced into early labour. Why would a doctor bring on a birth when the baby was not in distress?[551] [1967, KEMH]

5.8 A mother who gave birth in 1979 provided evidence that she was induced as part of a carefully orchestrated effort to give the prospective adopter a baby as a birthday present. Parts of her account are reproduced in the box overleaf.

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547 Submission 98.

548 Private individual 5, transcript of evidence.

549 For example: Submission 7; Submission 76; Submission 82; Submission 124a; Submission 150. See also Submission 110.

550 Submission 124a.

551 Submission 67.

Case study: unborn babies earmarked for adoption

"On antenatal record sheet beside LMP [last menstrual period] date there is a lot of heavy scrawl with two exclamation marks ["Remembers because of sister's BIRTHDAY!!"], this was added … the day before birth.

the last ante natal visit before going into labour was different. It started when I was quizzed in depth about the date of my last period and must tell the doctor *exactly* when it was and why I remembered it was then. The doctor was agitated, pacing around the room rubbing his head. … the examination was painful after this he said 'you will have the baby within 24 hours, go home and wait'. … Records confirm this doctor had 'stripped my membranes' – a procedure performed to hasten labour. …

the adoptive mother was a midwife at King Edward and she had transferred to the emergency department not long before adopting. She also shared the same birthdate – [as my son]. … *this baby had been selected if not before birth then straight after*.

When I got my records there is no valid reason for any intervention. … ultrasound due date was … 9 days away. There was no abnormal position of the baby …

a DCW statement prepared to support adoption … is signed off by *Name of Welfare Officer', Social Worker, Adoptions*, [same date]. Aside from it was not this person who actually interviewed me but another social worker stationed at KEMH there is also the strange fact it was prepared to accompany an 'Application to Adopt' and would not have been required at the earliest until 38 days later. i.e. 8 days to consent plus 30 days for revocation.

But the most peculiar is that out of all the 63 days between purported interview and then it was on this day the statement was prepared - the same day an intervention to hasten labour took place …

She had been told the baby was going to be born and as you will see this officer was very officious in ensuring this baby was ready for adoption. The only contact I had [that day] was with KEMH medical staff. Yet, the welfare officer knew to prepare her statement on that same day. How did she know unless a doctor from antenatal visit notified the social worker at the hospital who in turn advised the welfare officer? …

It is quite clear in minimally available records someone at KEMH kept track of when baby was to be born and ensured DCW knew that birth was approaching too. … It's most likely 'the system' was alerted immediately after the intervention had been performed. …

The date this report was prepared was not some random coincidence, advice about my medical procedure was shared as an alert to DCW to prepare for an *incoming baby for adoption* and statement to support adoption should not have been prepared until after adoption was actively sought by me and consent to adoption had been willingly provided."

[Source: Submission 98 (emphasis in original)]

5.9 Subsequent hospital records show that, on the day he was born, this mother's child was named after his adopters. Names are discussed further below from paragraph 5.73.

5.10 The inquiry received further examples in evidence of children being chosen by or for adoptive parents prior to birth, at birth, and prior to any consent, including the following account from an adopted person:

> My adoptive mother's uncle was a barrister, and he was responsible for arranging the entire adoption. The woman that adopted me told me that she was notified of my birth on the day that I was born. So in other words, before my Mother had 'made a decision' to put me up for adoption, it was already known that I would be

available for adoption and I had been 'earmarked' for the adoptive couple.[552] [1971]

Women were afraid and alone during labour

5.11 Unmarried women were left to labour alone, sometimes in the hospital corridors. Mothers described not knowing what was happening and being terrified.[553]

> I was left alone for ages it seemed, in a dully-lit passageway lying on a cold, hard, narrow trolley with no covers, told to keep my legs bent up at the knees, no privacy but bugger the embarrassment by then, as I was in so much pain I didn't care what they did or said to me. Lying on a trolley up against a wall, nurses and orderlies rushing past, not even a sidelong glance at me in my terror and ignorance.[554] [1957, KEMH]

> I felt like they shoved me in a cupboard to talk to me. I was not with the others; I was not in the normal area. I was left for a long time, just sitting there waiting and not knowing what was going on. I was a frightened child.[555] [1966, KEMH]

> I was extremely afraid throughout my pregnancy … I was dropped at Devonleigh Hospital early that morning and left to face what was about to happen to me and my baby completely deprived of any person I knew. Immediately I became afraid to the point of sheer terror.[556] [1968]

> I felt so alone and afraid not knowing much at all about childbirth, I wanted my mum but was told not to be so silly.[557] [1969, KEMH]

> I was put in a room with a lot a curtains around me and could hear the other women crying out and making very loud noises as they delivered their babies. I was mostly alone that I remember, and very fearful.[558] [1970, St Anne's]

> I did not know what was happening or the process, I was unaware of everything. I did not know about getting shaved. I did not know about an enema. I was not talked to by anyone. It was just done to me. I remember the terror of being in that corridor, which had very low lighting and was between different medical-type rooms, and just lying there until someone decided it was time to go into the theatre.[559] [1971]

> My birth at KEMH had been a harrowing experience as [my mum] explained that she had been so frightened that the staff were going to let her die.[560] [1972, KEMH]

The medical files of unmarried pregnant women were marked for adoption

5.12 The public hospital medical files of some unmarried pregnant women were marked with codes that signified their child was to be adopted: a triangle, an 'A' for adoption, an 'A' inside

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552 Submission 29. See also: Submission 151; Private individual 21, transcript of evidence.

553 For example: Submission 1; Submission 37; Private individual 21, transcript of evidence.

554 Submission 81.

555 Private individual 9, transcript of evidence.

556 Submission 59.

557 Submission 103.

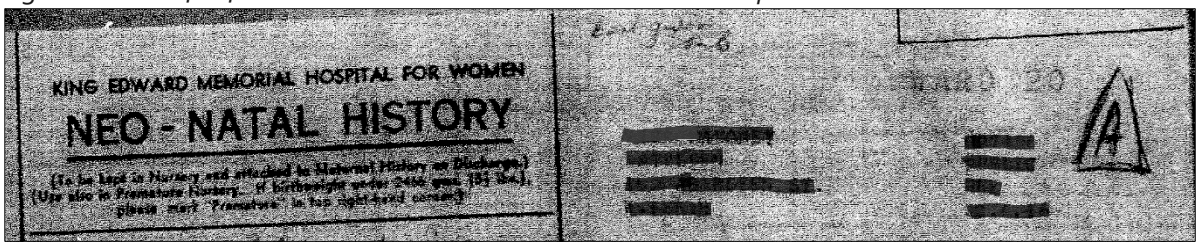
558 Submission 82.

559 Private individual 27, transcript of evidence.

560 Submission 110.

a triangle, 'BFA' indicating baby for adoption, or simply words such as 'Adoption'[561] – see example at Figure 6. This notation occurred when the mother wanted to keep her baby, and had not signed any official consent to her child being adopted after birth. Mothers stated that they had not discussed adoption with medical staff.[562] It is not always clear who marked the records of some patients thus.

Figure 6. *KEMH file for unmarried mother marked to indicate 'adoption'*



[Source: Private individual 22, tabled paper 1]

5.13 One mother recalled clearly that KEMH staff called her 'a triangle', which she thought was a reference to her blood-type.[563] Examples this mother provided to the Committee include files notated frequently and emphatically, and sometimes multiple times on the one page, as follows:

> Wants adoption (Ante Natal)
>
> NB* DOES NOT WISH TO SEE BABY Δ (Labour record)
>
> Does not wish to see baby beside my name (Labour record)
>
> Δ'Babe for Adoption' (Labour summary)
>
> Δ arrow to it (Neonatal)
>
> Δ (Serum request)
>
> Δ Name Δ (Neonatal x 2)
>
> Δ Adoption baby (Neonatal)
>
> Patient does not want to know anything about the baby.
>
> Δ EDD [dates] + S/W Δ (Ward patient notes)
>
> Δ (Birth information paper)[564] [1979]

5.14 In this case, the mother observed that the letters 'SW' and the name of the social worker appear throughout the file wherever it is annotated. She stated:

> These marks did not give any one of them the right to keep my baby from me though, even if I had thought about adoption before birth. After you give birth you become a mother to your child and this brings about a dramatic change - they were all in the business of helping mothers so, every single one of them knew this but not one bothered to check that adoption actually was what I wanted - they just continued on their merry ways.[565] [1979]

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561 For example: Submission 59; Submission 81; Submission 110; Submission 150.

562 For example: Submission 59.

563 Submission 98.

564 Submission 98.

565 Submission 98.

5.15 The mother also noted that the indicating adoption disappeared from her child's birth records 'after the social worker had got me to agree to adoption verbally'. She questioned:

> Were triangles removed after in principle consent had been achieved or did staff understand this baby had been claimed by someone they worked alongside so continued use became unnecessary?[566]

5.16 These marks indicated a child would be adopted because this was considered relevant to staff when making decisions about the treatment and care to provide to the mother and child.

5.17 Once born, the symbol followed the unmarried mother's baby:

> The symbol for adopted babies was a triangle on the cot. They are taken to the special nursery. You never see them again.[567] [1970]

5.18 Dr Christine Cole submitted:

> Marking of the files with a secret code … was discriminatory because unwed mothers were singled out for differential treatment based on their marital status … The marking of the files showed collusion between medical and social work staff and it was a system that was practiced Australia-wide. None of the above procedures were done for the benefit of the mother or her infant[568]

5.19 A mother identified that there could have been a different professional response to markings in medical files:

> nurses who took notice of markings on paperwork … took this triangle as reason enough to treat me like a sub class human being. Not once did anyone ask is this correct, is your baby for adoption, that's what the records say and we need to check it is correct – that's what duty of care entails[569]

FINDING 2

In WA last century, the medical files of unmarried pregnant women were marked to indicate that their babies were to be adopted. This notation occurred when mothers wanted to keep their babies, when they had not signed any official consent to adoption, and when they had not discussed adoption with medical staff.

Unwed women suffered discriminatory treatment from medical staff

5.20 Unmarried pregnant women were treated with indifference and disdain by some medical staff.[570] Places such as the private hospital operated by Hillcrest had separate sections of the hospital for married women and those unmarried women staying at the maternity home.[571] At public hospitals unmarried women were identified by file markings, and records show they were often sent to a specific ward.

5.21 Mothers reported experiencing contemptuous attitudes when they attended antenatal appointments. This continued once they were in labour. For example:

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566 Submission 98 (emphasis in original).

567 Private individual 16, transcript of evidence.

568 Submission 72.

569 Submission 98.

570 For example: Submission 82 (St Anne's); Private individual 25, transcript of evidence (KEMH); Private individual 24, transcript of evidence (Osborne Park Hospital).

571 Private individual 15, transcript of evidence.

> A seemingly kind nun was escorting me to a ward. She had her arm around my shoulder and said, "You are such a tiny little thing. Is your husband very big?" "I don't have a husband," I replied. She immediately removed her arm and her manner towards me changed completely.[572] [1970, St Anne's]

5.22 Mothers testified that they were ignored during their labour, including when they needed assistance.

> I was taken up into a room and there were some girls in there who had already given birth. The midwife went off. There was a nurse and a midwife there and they went off into another room. I was being sick and calling out for somebody. One of the girls had to get out of bed to try to find a midwife because I had been vomiting. When she put me in the labour room, she gave me a little hand bell and said to me, "When you are ready to have that, just ring me." I was absolutely terrified. I did not know what was going on. She did not come in. I do not really have a lot of memories. … most of the time I was just there on my own with this bell, and I was so scared.[573] [1970, Hillcrest]

> There was nothing. There was no eye contact or relationship to me. I was just moving through the factory. It was that sort of relationship. There was no personal contact. … I did not know the process. I did not know how much pain was right, wrong or anything else. There occasional nurses or whatever came past and inspected my lower end. There was no conversation or anything. That is why I thought of it as a factory; I was the piece that was moving through their processes without a relationship as a human being.[574] [1971, KEMH]

5.23 One mother read out an acquaintance's account of being a nurse in a WA hospital around the time of her birth. The retired nurse recalled being told not to engage with certain patients:

> I must have received instruction relating to this young girl, which were to not become involved in any discussion with her as she was an unmarried mother and at birth the baby would be removed from her without her knowing the sex or being able to hold the baby.[575]

5.24 Women also provided evidence that they were given drugs without their consent during their labour. One mother described being made to take sleeping tablets against her will upon arriving at KEMH in labour.[576] Another did not realise she was under the effects of drugs:

> I remember laying there for a little while and one of the nurses came round and asked me how I was feeling because the contractions had come back. I said, "Oh, no, fine. There's my feet walking on clouds over there." She laughed and said, "That's the medication you've had." I thought: "I didn't have any medication. I don't remember anything." I think they gave me a needle, but I do not remember. Anyway, I was pretty delirious.[577] [1966, KEMH]

5.25 Women reported being shamed and treated punitively by some hospital staff while their bodies were preparing to birth:

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572 Submission 7.

573 Private individual 15, transcript of evidence.

574 Private individual 27, transcript of evidence.

575 Private individual 21, transcript of evidence. See also: Submission 154.

576 Submission 103.

577 Private individual 9, transcript of evidence.

> Orders were given to me sternly without kindness or compassion throughout my preparation to give birth and my admittance to the labor ward. My labor pains were strong. After entering the labor ward I endured derogatory comments from staff and I was scolded over bodily functions which I had no control over. —Disgusting! was the word used. Shamed throughout my pregnancy, my shame reached infinite proportions through this treatment. As the process of labor continued, my terror and shame reached intolerable levels and I now believe my child felt my terror too.[578] [1968, Devonleigh Maternity Home]

> My labour was constantly harassed by a charge nurse (sister [name]) who was more like a female version of Hitler than a nurse. I was treated like a dirty animal and spoken to the same.[579] [1969, KEMH]

5.26 Women also reported being treated roughly when it came to their medical care, and this had implications for their children in-utero. One adopted person explained that both she and her mother had long nursing careers, so were able to evaluate the birth experience from an informed professional perspective. She submitted:

> My birth was unnecessarily negligent and traumatic for my mother and for me. During labour we were exposed to a cascade of events which subjected me to sustained in-utero neonatal stress and caused my mother's body to be butchered.
>
> …
>
> My induction was pharmaceutically supported with syntoncin via an IV line. The cannula was inserted into her skin via a cut down technique by a medical officer. This is a procedure whereby a vein near her wrist was cut with a scalpel and the IV line inserted directly into the open and exposed vein. My mother was bewildered as to why such a technique was being used as she knew it was only for catastrophic medical emergencies. She had excellent veins that could be easily accessed via normal IV cannulation techniques, she was not unconscious, nor experiencing a catastrophic medical emergency, there was no clinical indication for this technique. My mother believes she was being used as a training dummy by the medical officer. The scar from the cut down on her wrist was visible for decades after, she showed me the 1cm line on her skin, when I met her in 1991.
>
> My mother began to realise at this early point in our labour that she was not going to be afforded the same care she had given and witnessed as a nurse to married labouring mothers. She was often left alone without any supervision by nursing or midwifery staff. Occasionally, they would look in on her, there was no words of support or encouragement as she laboured. A midwife would check her cervix for dilation and then leave again without a word.[580] [1972, KEMH]

5.27 Of the pattern observed from their clients, the Adoption and Research Counselling Service stated that:

> Many speak of being treated poorly and differently to married women. … The majority of mothers speak of feeling as though they were treated without care and were made to suffer as punishment.[581]

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578 Submission 59. See also: Submission 109.

579 Submission 103.

580 Submission 110.

581 Submission 113.

Giving birth

5.28 Just as some women did not want their labour to begin because it signified that their babies would soon be taken from them, others were reluctant to birth their babies:

> Delivery was long and problematic: The medical team remark on my labour chart that I was an "uncooperative mother" "showing no sign of pushing out". I remember vividly choosing not to do so because I knew they would take my baby away if I did.[582] [1973, KEMH]

> I believe [my retained placenta] and the long labour was due to the condition called "white womb" from my fear as this can occur when the mother feels under threat and the natural instinct is that the body tries to "hold on" to the baby until danger passes.[583] [1975, KEMH]

> When it came to deliver my baby, I would not push I refused they had to use forceps.[584] [1981, KEMH]

Pain relief was withheld from some women, others were heavily sedated

5.29 When it came to pain management leading up to birth, Dr Cole opined that, 'it seems that either sedating mothers into unconsciousness or allowing them to languish painfully without any relief were both used to interfere with bonding.'[585] The inquiry received evidence of both practices.

5.30 Some women were not offered pain relief or were denied when they requested it:

> Suddenly, the pains were excruciating and I started to call for help. A nurse came in and told me to be quiet—no painkillers and no kindness.[586] [1964, South Perth Community Hospital]

> Induced labour is often more painful. [My mother] remembers it being so painful and not being given sufficient pain relief at one stage asking, "is this normal, this can't be normal".[587] [1967, KEMH]

> My labour was induced and I was in so much pain I thought I was going to die. My boyfriend [Name], the 19 year old father of my baby, became very distressed witnessing the birthing process, I recall him asking "what are you doing to her" which was followed by a threat to remove him from the birthing suite, my only support. To my knowledge I was not offered any pain relief or even gas.[588] [1975, KEMH]

> When I asked for pain relief, they say "it's too late now – you should have thought of that before". I was in labour for 12 hours. Finally, I made so much noise, they gave me pethidine to quiet me and stop me "upsetting the mothers"... the implication being I was not really a "mother" myself? ... I was left with the feeling that I was used for training purposes and not given proper care as I didn't matter as much as the married mothers.[589] [1975, KEMH]

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582 Submission 124a.

583 Submission 1.

584 Submission 70.

585 Submission 110.

586 Private individual 21, transcript of evidence.

587 Submission 67.

588 Submission 76.

589 Submission 1.

5.31 After a failed epidural, one mother recalled:

> The contractions continued with an intensity that frightened me beyond belief. [The doctor] gave me a local anesthetic but, it wasn't long before he said that he had a lot to do and I'd just have to be brave. Yep, that's what I had to do!!! What seemed like forever.[590] [1968, Osborne Park Hospital]

5.32 At the other end of the spectrum, a number of contributors reported not remembering parts of giving birth or having no recollection of birthing their children at all.

5.33 In relation to her Aboriginal mother's experience at age 18, an adopted person submitted:

> At the time of my birth my mother was given a twilight birth where she was given a sedative to keep her calm.[591] [1958, Broome District Hospital]

5.34 Others recounted:

> When I started labour, my sister took me to King Edward Memorial Hospital. I was taken to the labour room and given a bed. The next thing I recall was saying to a nurse "Sorry, I think I've wet the bed." She said to me "No, it's blood, you've had your baby." I noticed my hands were very bruised and there were needle marks in them. Also, I had been cut open to take out the baby. They used forceps to do this.[592] [1968, KEMH]

> Through the administration of drugs I was rendered unconscious and the next memory I have is a room full of complete strangers, my shoulders being raised and being told to push. My legs were in stirrups and there was a doctor attending who was completely unknown to me. I had neither physical pain nor sensation of any kind. I have had two further children and I can assure you that I was fully conscious and I felt everything.[593] [1968, Devonleigh Maternity Home]

> This time 1 week ago I was beginning to have you. But I was selfish because I couldn't take the pain that you were giving me so they had to drug me up. Forgive me for not allowing you to come natural. I can't quite remember exactly what was happening at this time, so please forgive me once again.[594] [1972, KEMH]

> I don't remember the delivery but when the child was born I was drugged and all I remember is the sense of something leaving my body. No noise nothing no crying.[595] [1970, St Anne's]

5.35 Some contributors who had obtained their hospital records were able to detail the drugs they or their mothers were administered:

> The next one is a neonatal history sheet from King Edward Memorial Hospital. … About halfway down the page it says that she was given nitrous oxide, Pethidine and Largactil.[596] [1965, KEMH]

> Upon reviewing my birth records obtained from KEMH I can see that my mother was sedated during the birth with Phenergan 50mg x2 (See attached summary of

590 Submission 109.

591 Submission 148.

592 Submission 115. The adopted person submitted, in relation to her birth, that her mother nearly died (Submission 117). It is unclear if the mother was anaesthetised because of a medical emergency.

593 Submission 59.

594 Submission 112.

595 Submission 82.

596 Private individual 22, transcript of evidence.

> labour). This and PTSD maybe the reason she had block some memories of that time. When we first met, she said she had trouble remembering that actual date of my birth.[597] [1967, KEMH]
>
> I got my notes out and saw that I was taken to KEMH … That night and for 10 more days my notes show I was given 200 mg of Amobarbital daily and 10 mls valium twice a day . This is the reason I can't remember that period. I was drugged. At no time was I hysterical or emotional . I may have been distressed at times because I was confused and not engaged with. At no time did I know I was given these drugs - I don't even remember putting these drugs into my mouth. Was I told it was folic acid ?[598] [1973, KEMH]
>
> I was "well-sedated" with a Valium drip for my anxiety, and Pethidine (opioid pain-relief medicine) and Sparine (tranquillizer) injections as needed to control my high blood pressure and pain before and during labour. … A mask of Nitrous Oxide (anaesthetic) was placed over my nose and mouth and all I recall in my diary was being "pretty much out to it" during the birth.[599] [1973, KEMH]

5.36 In relation to their clients' birth experiences in WA hospitals, Adoption Research and Counselling Service (ARCS) submitted that 'The use of medication and restraints as a way that institutions separated mothers from their babies, needs to be explored.'[600]

Women reported rough treatment during their labour and birth

5.37 Some women reported being ignored during labour. For this reason, it is unsurprising that women also reported how staff were caught off guard when birthing began. The following accounts attest to the way women were treated by unprepared medical staff, including staff pushing their babies back up the birth canal.

> Then more probing and poking from a harassed looking nurse, who gestured for another one to come and look at me, saying, "You're coming too soon. Try and hold on, we're not ready for you yet. You haven't even been shaved!" I couldn't answer, the pain was so intense. I was close to tears; living a nightmare. I badly wanted some of that gas the girls said they'd give you towards the end. And I desperately wanted someone here with me to tell me what was happening to me. Then a long steady blur of pushing, and pain. Worse still, when someone put their hand inside me to stop the baby coming out – they pushed him back in: the most terrible, excruciating sensation! Then bright lights blinding me, white tiles, lots of loud voices, rattles of metal clashing … echoing. More probing and poking at the source of my pain. Then suddenly the trolley was moving fast, bashing against wide swinging doors into a into a large, white tiled room. Now, dumped onto another bed with a huge white light above me, my legs unceremoniously poked through some straps at the sides of the bed. When would it stop? I wished then I would die, as I thought I couldn't take any more of this pain! Pleading to get some of that gas soon! Then a kindly voice through the fog! "Just a while longer, dear. No, you can't have the mask. Don't push. No! I don't want you to push until I tell you. You're doing nicely – [name], bring those ?xx?'s, she'll tear! Why didn't they send her in earlier?" … They said they couldn't give me gas as I was too far

[597] Submission 67.

[598] Submission 150.

[599] Submission 124a.

[600] Submission 113.

advanced, and they didn't have enough warning … I should have been there earlier when they weren't as busy![601] [1957, KEMH]

I was admitted and taken into a prep room where I was left alone by the attending Nursing Sister, who was not at all nice or helpful. I had to say over and over that I felt like vomiting and was simply told by the nursing that the feeling was "common". She eventually gave me a kidney dish and I was very sick. Asking for a pan I received the same reply, "that's common", and again, after some time, she finally given one and then left me on the examination table with it, before leaving the room. I was in intense pain and calling out in agony. The Charge Sister arrived and said indignantly, "What's all this noise about?!" I replied ,"I'm having a baby!" A quick look by her and she said, "she's crowning."[602] [1968, KEMH]

The birth was a was a traumatic experience. No one would speak to me. None of the doctors or nurses said anything to me. I remember a horribly painful injection in my spine. I remember screaming, begging them to stop and crying for my mother. I believe I had a seizure and have a fleeting memory of many people running into the cubicle. I also remember feeling that I couldn't endure any more. The day after the birth a nurse did speak to me. She said that all the nursing staff had thought I was faking labour and were surprised that it had been genuine.[603] [1968, KEMH]

5.38 As during labour, mothers described being shamed and ill-treated while giving birth, as well as being subjected to obstetric violence. For example:

After I was examined, I was put in a room by myself when I was left for hours to labour alone. I was frightened and scared. Later I was taken to another room where I gave birth to my daughter. I was put in stirrups with a sheet covering the stirrups, thus preventing me from seeing my baby after her birth. My baby was taken from the delivery room immediately after her birth by two nurses. I was left alone with a doctor. Neither of these people spoke to me, it was as if I didn't exist. The doctor sexually abused me. I felt violated, humiliated, and further shamed. … The KEMH' treatment of me was poor, inhumane, illegal, unethical, lacking any compassion or kindness and punitive. I felt dehumanized, powerless, and worthless.[604] [1965, KEMH]

I remembered feeling really frightened and also a sense of shame and guilt because of the way I was spoken to. They told me it was best not to look when the baby was born and they immediately took him away. … the first word in my mind is "cold". Cold response—very clinical. I can even now see the nurse coming in, "This one is from Ngala", "She's from Ngala, and "This one is from Ngala and the baby is going to get adopted." It is like going to a supermarket. It was just very—and then the birth process, it was all—I remember being left on my own for a long time. There were no words of … compassion. … No "No, you're okay, honey." There was no—as soon as you asked that question, it was just like cold. Just a number or not even a number, just a thing. Yes, it was not good and it is hard to go from one place to another, but I was glad to get out of there the next day. And also the feelings that I felt of being—just when that offhand comment, you know, the shame, like I was an unclean. I know it is hard to describe—not unclean, just it is not worth giving her any time, you know, worthless. It was not good. … I remember being left on my own and then just going back the next day … I think I

601 Submission 81.

602 Submission 37.

603 Submission 50.

604 Submission 73.

> was in shock too and not talking, but there was nothing to compare it to, no.[605] [1971, South Perth Community Hospital]

5.39 Staff shaved mothers before birth, and routinely gave them enemas; however, these practices were not adequately explained to mothers. Mothers were then shamed for normal bodily functions if the enemas were not effective or timely, adding to their mortification.[606]

5.40 Similar to during antenatal checkups, groups of medical students witnessed unmarried pregnant women's births without their prior knowledge or consent. Some were instructed to practice their techniques on birthing women or new mothers to advance their training. Women felt exposed and demeaned by these situations, further adding to the trauma they were already experiencing and were still to experience after birth.

> I kept saying that I wanted to go to the toilet, not knowing that it was the baby coming. When I tried to look up at what was happening, I saw about 10 people in white coats all peering at my open nightgown. I was scared and the nurse told me that they were student doctors and as I was an unmarried mother they were allowed to watch. I started to cry and felt more alone than ever before. I was scared, in pain and had a hundred eyes staring in a place that I thought was private to me. I wanted to get up and run far away. My baby was delivered by student nurse [name].[607] [1966, KEMH]

> Only one young nurse treated me with dignity and compassion, she came with me into the delivery cubicle where I was confronted by a hoard of young male interns who had come to see the delivery. I was not asked if they could observe, I was told they would stay. (The last vestige of my dignity was obliterated at that moment; I was finally broken or so I thought).[608] [1969, KEMH]

> in heavy labour I saw a group of about 10 young nurses watching at the end of the bed and my eyes met another girls eyes who I had gone to school in Kalgoorlie with . I felt humiliated , disrespected, and like an experiment.[609] [1973, KEMH]

> When I went into labour on 3 September 1981. I was in a room with my boyfriend and my mum was there. I was given an epidural and my feet put in stirrups. During this time, a doctor came in with several students and proceeded to tell them my age and that I was placing my baby up for adoption and proceeded to let the students lift the sheet to look and feel at how far dilated my cervix was. I was mortified, humiliated, and so upset. My mother said something and was told this was a teaching hospital. No asking for permission. I just retreated into myself and would not say a word.[610] [1981, KEMH]

5.41 One mother explained that, later in life, she sought out a psychologist who specialised in abuse and sexual abuse in relation to her experience of giving birth in front of a group of medical students as an unmarried mother:

> Why did I choose to see that person? I chose to see that person because through my lived experience of what happened to me in that hospital, I was left feeling like I was medically raped, in a room of wall to wall people who were there to witness and learn hospital/medical procedure and did not care about me as a human being. It was excruciatingly embarrassing, invasive, abusive, demeaning, cold, cruel,

605 Private individual 23, transcript of evidence.

606 Submission 109.

607 Submission 108.

608 Submission 103. See also: Private individual 5, transcript of evidence.

609 Submission 150.

610 Submission 70.

> calculating and inhumane. By action, deed and word of those involved at that hospital and beyond, I got the message that it was my fault and I deserved it. How many abuse survivors have been groomed to believe the same? [611] [1968, Devonleigh Maternity Home]

5.42 Many women in evidence were given episiotomies.[612] One contributor mentioned being given a bungled episiotomy with inadequately sharp instruments which necessitated several attempts from the doctor performing the procedure.[613] Another reported that her episiotomy was performed by a trainee midwife and was excessive.[614]

5.43 Evidence reveals how at KEMH in the 1960s and 1970s it was common practice for sheets to be pulled up in front of unmarried mothers to prevent them from seeing their babies at birth.[615] This was done without the mother's permission.

5.44 Generally, women attested to being treated with little consideration or regard, and, for some, in a brutal manner, or not as their medical circumstances required:

> the treatment in the hospital, [my mother] said she was treated like she was a piece of meat.[616] [1965, KEMH]

> When I gave birth I remember the Nuns were not at all sympathetic. I felt I was being punished for being wicked.[617] [1967, St Anne's]

> Since then, I have had a few more babies; I know it does [hurt]. But that one was a little bit more brutal. I know it was sore—really sore.[618] [1966, KEMH]

> while my legs were still in stirrups a bucket of warm soapy water was thrown from the end of the bed over my vagina. I was in shock and felt like a dirty person.[619] [1967, KEMH]

> Being blessed later, with two further sons and having now known what could be considered a fairly normal delivery, then I can report that my first delivery was a shocking and barbaric experience. I have felt full of sorrow when recalling the loneliness and utter horror, of how this delivery and confinement had gone for my 17yr old self.[620] [1968, Osborne Park Hospital]

> First births are often difficult and mine was made worse by my mother's narrow hips- unable to accommodate my unusually large head. I should have been a caesarean, but these were routinely avoided for unwed mothers, so their future husbands would never know of their indiscretion of having a baby outside marriage.[621] [1972, KEMH]

5.45 Contributors suggested that hospital staff protracted the births of some mothers deliberately in order to wear them out and thus render them more compliant.

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611 Private submission.

612 For example: Submission 59; Submission 82; Submission 124a; Private individual 27, transcript of evidence.

613 Submission 109.

614 Submission 1.

615 For example: Submission 67; Submission 73; Submission 108; Submission 124a.

616 Private individual 22, transcript of evidence.

617 Submission 52.

618 Private individual 9, transcript of evidence.

619 Submission 89.

620 Submission 109.

621 Submission 110. For the opposite case, see Submission 42.

5.46 Most contributors were of the view that, as unmarried mothers, they did not receive the same treatment that married women were given during their labours and births at the time. While some women compared their births when unmarried to later births when married, one mother also provided a close comparison between her own birth and her married sister's birth, in the same place, one year apart in the 1960s. The submission provides a compelling example and counterexample of the discrimination unmarried women were subjected to as they gave birth.

> In relation to the possible differentiation between the levels of drugs given to married women giving birth and single women, I would like to point out that in my case, my married sister gave birth to her daughter in July 1967 at Devonleigh Hospital Cottesloe, Western Australia. It was a difficult labour, as the baby was large and my sister is quite petit. My sister's labour was described to me by her in graphic detail, she remembered everything. Almost to the day, one year later, as an unmarried mother, I gave birth to my daughter at the same hospital under the same GP. He is on the medical records as my Doctor. … I remembered very little about the labour and have virtually no memory of my stay in hospital. Effectively I was unconscious during labour from early in the morning to being roused to push a couple of times just as she was born at 9pm that night then rendered unconscious again. I had two further children as a married woman … and I was fully present and awake during those labours. Both babies were placed on my chest and put to my breast immediately they were born. The other discrepancies in our treatment are as follows. We had the same GP and he delivered my sister's baby, however he did not deliver mine. I did not see him during my hospital stay. According to my records, I was a private patient under the Hospital Benefit Fund and he is noted as my Doctor, however when they roused me to push, a strange doctor and young intern were between my legs and the room was full of people observing. My sister was given her baby at birth in 1967 and her baby was brought to her, throughout her stay in hospital. She had visitors all the time. In 1968, the same hospital told me my baby was gone and I had no visitors until I was collected from the hospital.[622] [1968, Devonleigh Maternity Home]

5.47 Mothers who birthed in WA public hospitals in the 1960s and 1970s submitted that they suffered complications due to substandard medical treatment. These included infections from staff not cleaning them properly or not using adequate sterile techniques, and cervixes so damaged they were unable to birth vaginally again.[623]

5.48 A psychologist with long experience treating forced adoption clients in WA opined:

> in terms of hospital care, there were clearly two standards of care. If a woman went in with a husband and had already had a child, it was a joyful experience. For those who were not in that position and were on their own, it was absolutely traumatic and abhorrent. It is as if they were punished. Is the attitude of care givers illegal? Probably not. They probably still got the medical care that they needed eventually, but the way in which they were treated was pretty reprehensible in general terms.[624]

Infants suffered due to the treatment of their mothers during labour and birth

5.49 Adopted people were affected by the way their mothers were treated while they were being born. Mothers recalled the impact of the drugs they'd been administered on their newborns:

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622 Submission 59.

623 Submission 1; Submission 76; Submission 109.

624 Private individual 19, transcript of evidence.

> No noise nothing no crying.[625] [1970, St Anne's]

> I had been anaesthetized and sedated, and, as doctors in the labour ward remarked on their record sheet, my baby at birth was "floppy and unresponsive" from "maternal sedation". So I didn't even get to hear her cry.[626] [1973, KEMH]

> My baby was taken to Intensive Care with a low Apgar score (I found out later) which meant she had been in distress and either had breathing difficulties or poor colour or similar, perhaps due to the pethidine.[627] [1975, KEMH]

> There was also a record that it took the baby 6 minutes to breathe and had to be intubated for 8 minutes due to 'Morphia Effects'.[628] [1979, KEMH]

5.50 Other babies sustained injuries that stayed with them for life:

> My birth mother had told me that the doctor was not too nice, and when she could not push me out naturally, he said to her, "Stop being so lazy. You did this to yourself." … I did not want to come out, so they ended up removing me with Kielland forceps, which resulted in me having a facial palsy, which I still have today.[629] [1976, KEMH]

Separation at birth

Mothers were prevented from seeing or holding their babies at birth

5.51 Evidence from those with lived experience consistently described the separation of themselves as new mothers from their babies, or themselves as newborn babies from their mothers, at birth.

5.52 Following birth, staff immediately took the newborns of unwed mothers out of the room.[630]

> The nurses pushed me back to lie down as the Doctor grabbed my baby and he was gone! In the arms of the Dr. Out of the room and there was a dreadful silence. I couldn't hear anything.[631] [1968, Osborne Park Hospital]

5.53 Sometimes this practice was not clearly understood by all staff. For example:

> When the baby was born the nurse said I had a baby boy and went to give him to me. The doctor intervened and said no the baby was up for adoption and to take my son away. I did not get to see or hold my son.[632] [1981, KEMH]

5.54 Mothers reported being routinely prevented from seeing their newborns.[633]

> [My mother] said when I was born she wasn't even allowed to hold me.[634] [1948, Alexandra Home]

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625 Submission 82.

626 Submission 124a.

627 Submission 1.

628 Submission 98.

629 Private individual 28, transcript of evidence. See also: Submission 110; Submission 120.

630 For example: Submission 37; Submission 73; Submission 148; Private individual 15, transcript of evidence.

631 Submission 109.

632 For example: Submission 70; Submission 109.

633 For example: Submission 20; Submission 148. See also: Submission 154.

634 Submission 12.

> I lifted my head to see him, to get my first glimpse - where was he? The nurses stood, their backs to me doing something, when I finally heard him; his first cry, a little mewling, squawking cry, that particular, unique wailing sound I cannot, nor will ever forget. His first call to me - he wanted me then - and they denied us both. Even now when I hear the cry of a newborn baby, the memory still brings me out in goose bumps. A large dark haired nurse stood deliberately obstructing my view. Then he was gone… gone before I could see anything of him.[635] [1957, KEMH]

> I gave birth on my side with a Nun holding my top leg up and my baby was taken away behind my back so I couldn't see her. I was told I had had a girl.[636] [1967, St Anne's]

> My beautiful little baby was born and I heard her terrified cries for me, her mother. Her helpless plea to begin her transition into the world slowly and naturally, via the warmth, knowing and safety of her own mother was inhumanely and deliberately denied her by hospital staff. They covered my face to prevent me seeing her and drugged me into oblivion. … Did I ask *not* to see my child?[637] [1968, Devonleigh]

5.55 Having already birthed, mothers were often given more drugs.[638]

> They would not tell me whether it was a boy or a girl. They said we did not need to know. They would not tell me even if it was alive. I kept screaming at them: "What have I had? What have I got? What did I have?" They told me to mind my own business and stop upsetting the other women and be quiet, that it is all over now: "You can go home and forget about it." Then they gave me something, obviously, because I was put to sleep. I wish they had done it forever. I wish I had been put to sleep forever.[639] [1966, KEMH]

> I felt very frightened being left alone in the prep room where I had the baby. He was immediately removed from the prep room. I have no other recollection or conscious memory of the aftermath of the birth until I was in an anteroom, prepped to be taken to the ward by an orderly. The baby was swaddled in a crib up against the opposite wall a couple of metres away, out of my reach. My brother was called in to see me in the anteroom. He was told to stand at my head. A nursing sister came in and gave me a powerful sedative, maybe Pethidine. When she left the room, the baby and crib were gone – I don't know where as I was not told![640] [1968, KEMH]

5.56 Yet, other mothers who gave birth at KEMH around the same time explained that they *were* allowed to hold their baby briefly.[641] It seems, therefore, that clean break practices were not uniformly enforced.

> My son was born after 8.00 am the next morning and I asked if I could hold him. I was told in an abrupt manner that they didn't do things like that there but in maybe a weak moment they let me hold him for one minute.[642] [1967, KEMH]

> I gave birth to a healthy … baby girl who I was able to hold for a few minutes before she was taken from me to go to a special nursery for illegitimate babies

635 Submission 81.

636 Submission 52.

637 Submission 59 (emphasis added).

638 For example: Submission 59; Submission 108.

639 Private individual 9, transcript of evidence.

640 Submission 37.

641 For example: Submission 110.

642 Submission 89.

> who would be taken back to Ngala, there they would stay until they were adopted.[643] [1969, KEMH]

5.57 It is clear that some hospital staff did recognise that unmarried mothers should be given the opportunity to see and hold their own children at birth. Newborn babies also had a right to be held and fed by their mothers at birth. Instead, most encountered only strangers.

FINDING 3

Newborns were removed from their mothers at birth without the mothers' consent. In many cases mothers were prevented from seeing or holding their babies at birth, and adopted people were denied being held by their mothers at birth.

Mothers were not told basic information about their newborn child

5.58 Some mothers were treated as though they were not entitled to any information about their child at all.

> I thought I heard someone say "It's a boy." I cried. "Is it? What is it? What did I have?" Great gulping sobs. "Don't ask me," another voice, cranky sounding, "ask someone else!" I cried harder. A nicer soft voice, "Come on, don't be silly dear, it's all over now. … At first, she didn't even want to confirm whether 'it' was a boy, or a girl? My pleas were brushed aside, "No, not now. Ask someone else later". (Bitch!) Another brusque nurse tells me, "Pull yourself together, no need for tears, you'll be in the ward in no time and you can have a nice sleep. It is all over now." Ha! Little did she know the pain was just starting - this was merely the beginning![644] [1957, KEMH]

> When the baby came, I asked what it was, a boy or a girl, and I was told it was better I didn't know. I asked if it was alright? And I was told it was none of my business. I asked if it was alive? I was told that I should keep quiet now as I was distressing the other Mother's. I tried calling out to see my baby but don't remember anything more until I woke up in the morning.[645] [1966, KEMH]

> No updates on the welfare of my baby were given, even though I was still her legal guardian up to and after I left hospital and signed the adoption papers. Nor did I ask because I presumed by their silent omission that it was not permitted.[646] [1973, KEMH]

5.59 Other mothers who entreated staff were eventually told the sex of their child, and nothing else:

> WITNESS: I was born at the Hillcrest hospital in Fremantle in 1965. From what I understand, [mother's Name] has told me she had no family or support available. I was removed straight after birth.
>
> Hon SHELLEY PAYNE: Take all the time that you need.
>
> WITNESS: No, that is fine. [Mother's Name] was not able to hold me. She did not even know my sex. It was only subsequent begging to one of the nurses, who at

643 Submission 103.

644 Submission 81.

645 Submission 108.

646 Submission 124a.

> least showed her some compassion, that she was advised that she had given birth to a male.[647] [1965, Hillcrest]
>
> Then I heard a baby crying. I saw a nurse walking away and I knew she was carrying my baby. I begged her to tell me if my baby was a boy or a girl and heard her say one word, "Girl." My baby daughter was taken away immediately. I don't even know how much she weighed. I don't know where they took her.[648] [1968, KEMH]
>
> [My child] was born on the afternoon of the 19th March 1970. I asked the doctor if my baby was a girl or a boy. He told me it was a boy. I then tentatively asked what the colour of his hair was, to which he replied, "He doesn't have any hair and that's all you need to know." That was to be the only bit of information I had for 29 years.[649] [1970, St Anne's]

5.60 Some only found out the gender of their child much later:

> After several days of living in a daze of what was happening, my local doctor came to see me. He was lovely. I asked him if I had had a baby. Only then did I know. He told me I had a beautiful baby boy.[650] [1957, Hillcrest]
>
> I was informed of the sex of my baby by my mother upon discharge.[651] [1968, Devonleigh]

Mothers and infants were prevented from breastfeeding

5.61 The forced adoption practice of removing babies from their mothers at birth was not possible prior to the 1940s, when formula became regarded 'as a well known, popular, and safe substitute for breastmilk'.[652]

> Until the introduction of safe baby formula, the babies of unwed mothers were kept with them so they could be breastfed. This guarded against infant mortality. Once baby formula was introduced the babies were taken at birth, as the mother became obsolete.[653] [1968, Devonleigh]

5.62 The Department's 1929-30 Annual Report explains the very different adoption process followed in WA when breastfeeding was necessary, and valued:

> The activities of the Child Welfare Department start right at the birth of the child. In order to keep the mother and child together during the period of natural feeding, so necessary to vigorous babyhood, the State, when necessary, assists the mother with a maintenance allowance. When the time arrives for mother and child to part the duty of the Department is to provide the child with a foster mother, or, better still, adopting parents.[654]

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647 Private individual 8, transcript of evidence.

648 Submission 50.

649 Submission 7.

650 Submission 60.

651 Submission 59

652 E Stevens, T Patrick and R Pickler, 'A history of infant feeding', *Journal of Perinatal Education*, 2009, Spring 18(2):32-39, p 36.

653 Submission 59.

654 Child Welfare Department, *Annual Report 1929-30*, p 9.

5.63 This practice ceased when an alternative became available. After birth from that point, some mothers were put in wards with other new mothers breastfeeding their babies; however, they themselves were not given their children to feed.

> There was still more that I had to endure; being moved into a ward of young mothers all happily breastfeeding their babies, asking me what I had and if I would breastfeed (How could I tell them my baby had just been taken from me against my will to be given to someone else to raise) I was so distraught I just couldn't even talk I just wanted the floor to open up and swallow me.[655] [1969, KEMH]

> When I woke up in the morning, I was in an 18-bed ward with all the new Mothers. The nurses were wheeling the babies in to be fed. My milk was pouring out of me, and my nightgown was wet through. I asked to see my baby, but I was told that "it" had already been taken away to a new home with two parents and that I should forget it all now. I cried and cried and cried. The nurses kept telling me to be quiet as I was disturbing the mothers and babies. But I was also a mother and had nothing.[656] [1966, KEMH]

5.64 As their milk came in, staff bound unmarried mothers' breasts to try and suppress their milk.[657] Mothers consistently described this as being extremely painful.[658]

> I had to have my breasts bound to stop my milk coming in to feed my baby, my baby who was now being fed on formula. … a binder and pins thrust impatiently into my hands: wide strip of material to tightly bind around my chest, squashing my breasts up hard against the rib cage to discourage further production of the precious milk I had for my son[659] [1957, KEMH]

5.65 Other mothers remembered, or have deduced, that they were administered a drug called diethylstilboestrol (DES).[660] Last century, DES was used in Australia during pregnancy to prevent miscarriage, but was also given as a lactation suppressant. Some women were given this drug without their knowledge; no women in evidence took it with full prior and informed consent.

> Did I ask for anti-lactation drugs to dry up my milk?[661] [1968, Devonleigh]

> I was told at the time the drug I was being given was to dry up my milk. This I was told after I came out of the shower saying" I'm leaking milk from my breasts take me to my baby". I knew going on Mother instincts alone I should be using my milk to feed my baby I thought this at the time but didn't verbalise this. The reply back from nun was" it's not your baby you can have a baby of your own another time when your married" end quote " nun told me to stay there and she came back and barbarically bounded up my breasts tightly and told me to take the medication.[662] [1973, St Anne's]

5.66 At the same time as some WA mothers were being given DES in other hospitals, physicians at KEMH were explaining that they had ceased the practice.

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655 Submission 103.

656 Submission 108.

657 For example: Submission 1; Submission 52; Submission 115.

658 For example: Submission 81; Submission 115; Submission 124a.

659 Submission 81.

660 For example: Submission 1; Submission 154; Private individual 24, transcript of evidence.

661 Submission 59.

662 Submission 6.

> Denied his first milk, I develop engorged breasts and hot hard lumps that were extremely painful! The obstetrician, Dr White explained that he would not prescribe stilboestrol, as was commonly prescribed to dry up mother's milk, as he said, "this drug is known to cause breast cancer in later life." Not so lucky for many other single mothers of the time. Instead I suffered being treated with hot showers and poultices.[663] [1968, KEMH]

5.67 The problems associated with being administered DES, and the concern of mothers and their daughters about potential health implications, is addressed from paragraph 9.110.

5.68 Through the lens of time, the practices of suppressing milk production and withholding mothers from their children was inhumane. Effort to explain these practices was absent.

5.69 Mothers whose lactation was not suppressed also had difficulty. One described being collected from KEMH and made to call in on a family member who had just had a baby, and that her milk let down when that baby cried. She said:

> I'd not been given anything to dry my milk and my breasts were swollen and so very painful. … It was just a case of get on with it. You know, "You've only had a baby, get on with it." But I was in a lot of pain, not from the birth, but from the fact that my milk had not been dried up. They gave me nothing. I do not know if you have got children, if you have and your wife has had mastitis, times that by 10 and go for 10 days and then another week before you can see a doctor down here to have something done about it. That was horrendous and it was inhumane. I would not even do it to a cow or a dog or a cat.[664] [1969, KEMH]

5.70 Clean break practices resulted in women suffering from producing breastmilk and not being able to breastfeed, while their newborns were nearby, sometimes also suffering as they struggled to feed without them.

> I was put in a room next to the nursery where my daughter was being bottle-fed by strangers.[665] [1964, South Perth Community Hospital]

> Back at Ngala, I went to see my son outside of the nursery, and the nurse told me that he was not taking to the bottle. I felt helpless and so sad[666]. [1967, KEMH]

> On day 2 I was transferred to the special care nursing as I had failed to establishing feeding. The notation under remarks on the neonatal nursing notes, state, 'Not interested in feeds'. This is a sign of neonatal distress, a consequence of my removal from my mother. At no time was my mother informed of this significant event in my wellbeing or was offered/allowed to breast feed me, which would have been the most effective means to resolve my weight loss.[667] [1972, KEMH]

5.71 The production of breastmilk occurs via a positive hormonal feedback cycle. By denying mothers access to their babies, actively suppressing lactation through breastbinding and medication, and ultimately preventing them from breastfeeding, hospital staff rendered them unable to do so. This meant that, even if women had been able to get their children back, their one free and practical means of sustaining their children was no longer available.

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663 Submission 37.

664 Submission 103; Private individual 5, transcript of evidence.

665 Private individual 21, transcript of evidence.

666 Private individual 25, transcript of evidence.

667 Submission 110. See also: Submission 120.

5.72 Further, babies were denied the immunity-building benefits of their mother's colostrum and breastmilk,[668] and the hormonal and physiological benefits of the motherly contact and closeness afforded by breastfeeding.

Hospital staff named or renamed the babies of unmarried mothers

5.73 Whether or not their mothers had already bestowed a name, the babies of some unmarried mothers were named by hospital staff.[669] For example:

> The nuns were informed that my baby was to be adopted and so she was removed immediately from the delivery room, without allowing me to see her or hold her. I was told a few days later that she had already gone to her new family, which I was to discover many years later to be a lie. The nuns chose to name her [Name], which I found very distressing. I had no rights at all, was not asked what I would like to call her, did not know if she was a healthy normal baby, and had no idea what she looked like. I felt totally powerless[670]. [1968, St Anne's]

> Did I ask for a matron or nurse to name my child. I will have to live with the insult of a name I hate on my daughter's original birth certificate—forever.[671] [1968, Devonleigh]

> I identified my own baby immediately and saw that her name tag said "[Name]". I asked why they had named her as she was my baby and I had named her [other Name]. They said it was her new name, leading me to believe the new parents had already picked her name. (Not so.) … I asked them to remove the "[Name]" name and put "[other Name]". These young nurses seemed very nervous about and unsure what to do as they had to follow "the rules", but I had just stated what I wanted as I believed I still had a right.[672] [1975, KEMH]

> I was given registration papers the next day after my son was born to register his birth. The nursing staff had filled them out and named my baby. I asked who [Name] was and they told me this was the name they had given him after the doctor at KEMH. I was upset about this and wanted to name him myself but was ignored and made to sign the papers. I have the papers today which are filled out in another person's handwriting then my 15year-old signature. Throughout this whole process I was coerced, lied to, and shamed. I was denied from seeing, naming, or holding my son. I truly believed this was part of the adoption process.[673] [1981, KEMH]

5.74 The boxed case study after paragraph 5.8 above presents how one mother's child was marked for adoption by a nurse at KEMH. Despite this mother having already named her son, he was renamed by staff with a different first name, and the Christian name of his eventual adoptive father as a middle name, on the day he was born. This mother described her shock at seeing this foreign name typed on the letter granting her FOI request to her KEMH hospital records, and handwritten within them. A KEMH records officer advised her that a '*double barrelled name was not common and highly irregular, she had never seen it before*'.[674]

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668 Submission 87.

669 For example: Submission 29; Submission 57; Submission 98; Submission 110; Submission 154.

670 Submission 43.

671 Submission 59.

672 Submission 1.

673 Submission 70.

674 Submission 98 (emphasis in original).

5.75 The practices of not allowing mothers to choose a name for their baby and not honouring the chosen names were coercive elements of forced adoption. Mothers were treated as if they already had no rights over their own child.

Access

Mothers and infants were denied access to one another

5.76 Once separated at birth, babies were taken to hospital nurseries and looked after by staff. They were denied access to their mothers. Some new mothers were completely denied access to their children.

> Even at the hospital, I had been told to keep away from the Maternity Nursery. It was forbidden … to those like me! Another distortion of the truth; more deceit, I found out years later. Our son was legally ours until the adoption order was ratified in the Supreme Court, and they lied to us! They denied us our only chance of holding, cuddling and kissing him. How could they be so cruel? It was not much to ask, particularly as they were keeping him to give to someone else![675] [1957, KEMH]

> No-one would let me see my child when she was born even though she was only just up the passageway from me.[676] [1964, South Perth Community Hospital]

> I didn't know where my baby was. … I knew I had a baby, but I didn't know where she was.[677] [1968, KEMH]

> It was my understanding that my baby had gone and I thought they were allowed to take her and I had no right to stop them.[678] [1968, Devonleigh]

> [The doctor] left explaining that my baby was in good hands now. I would not be seeing my baby. I just remember crying and wishing I had someone there, I felt so lost and alone. I was left with the echo of those words from the Doctor, in my head, "I was not allowed", and that was it! No one brought my baby to me.[679] [1968, Osborne Park Hospital]

> Mum screamed to see me so much they showed her a baby, whichever baby was available, to keep her quiet.[680] [1969, KEMH]

> I was put up on the maternity ward with other mothers. I could hear and see the other babies. I went down to the nursery to see my son but was sent back to my room. When I became upset about this, I was given medication to knock me out. I tried a few times and each time I was brought back to my room and given medication. Unbeknown to me my parents had come up to the hospital and had gone to the nursery to bring my son to me. They were stopped by nursing staff, escorted out of the hospital by security and told if they came back, they would have them arrested for trespassing. I only found this out about 15 years ago during a counselling session with my parents. All these years I thought my parents

675 Submission 81.

676 Submission 20.

677 Submission 50.

678 Submission 59.

679 Submission 109.

680 Submission 149.

were upset and ashamed of me and that is why they did not come to the hospital.[681] [1981, KEMH]

5.77 Fathers were also denied access to their newborn children. One recalled:

> We both were forbidden by parents, hospital staff and agency staff to see our new born baby.[682] [1969, KEMH]

FINDING 4

Unmarried mothers and fathers and their newborns were denied access to one another.

Some mothers were allowed restricted access to their newborns

5.78 Some women in evidence explained that they were allowed to see, but not touch, their newborns.[683]

> I kept asking to see my son and was refused until about four days later. I was taken up and down lifts and corridors and permitted to view him through the nursery glass window. I was permitted no touching, no holding, no feeding and there was no way that I could ever find the nursery in the hospital maze. It is remarkable to me that it is now illegal to remove puppies from their litters until they are six weeks old, but not my human baby![684] [1968, KEMH]

> I was taken to the special nursery at my request the next morning to see my daughter but was kept a distance away and not allowed to even touch her.[685] [1969, KEMH]

> Sister [Name] took me to see a baby on Day 5. When I reached out to touch his head, she slapped my hand. Later when I met my son and saw his birth photos, I knew the baby I saw was not my baby. That is why Sister [Name] slapped my hand.[686] [1970, St Anne's]

> Our babies were put in a nursery, and there was a glass window. The doors were locked, but we could look in. We did not know which one was our baby, but we could look in and see the babies. We had been so shamed in all the months that we had been there, shamed into thinking we did not deserve to have our babies. Even though we had not signed any papers, and she was still mine and they were still ours, we did not feel we had the right to ask to hold them.[687] [1970, Hillcrest]

> [My mother] was allowed to hold me only once for about thirty seconds when I was born and would not see her own baby again for sixteen years, even though only a few walls separated us while we were both at Ngala.[688] [1971, KEMH and Ngala]

5.79 Some mothers went looking for their newborns all through the hospital. Women who had not been allowed to see or hold their newborns did not know what they looked like, and

681 Submission 70.

682 Submission 61.

683 For example: Submission 12; Submission 112; Private individual 25, transcript of evidence.

684 Submission 37.

685 Submission 103.

686 Submission 151.

687 Private individual 15, transcript of evidence.

688 Submission 111.

some had been given different names by nursing staff, so finding the right nursery did not necessarily mean finding their child.

5.80 One mother remembered being told that babies were brought to their mothers at feeding time, so went looking for a baby left behind in the nursery at that time:

> I found no babies waiting to be fed. Then I remembered there was a nursery down stairs somewhere near the birthing sweet, but it wasn't called that then, and so I search for it and found it. There in the back of the room was 1 crib with a baby in it. All on his own. I Could not see if it was a boy or girl, but I felt it was my boy. I just cried and slowly walked back to my room.[689] [1970, St Anne's]

5.81 Some mothers did not get far:

> I succumbed to unconsciousness again and woke up in a room. I was bewildered, shaking uncontrollably and what I realize now in profound shock. I stumbled out of the bed, trying to find my baby. I was standing in a pool of blood. At that moment a member of the nursing staff came in and I asked what was happening to me. I was dealt with harshly and told angrily —you have just had a baby, you silly girl. Get back into bed. I asked through timid tears —Where is my baby? The response was a very firm —Gone.[690] [1968, Devonleigh]

5.82 Other mothers were able to find their children:

> I was kept on the ward with other mothers and babies for several days during that time I asked if I could see my daughter. I was refused access to her. I went to the nursery one day and demanded to see her. I spent about five minutes with her under the supervision of a nurse. I was unable to touch her due to her been in an incubator.[691] [1969, KEMH]

> I was shown my baby in the delivery room but then she was taken away and I they would not tell me where. I overheard some nurses talking about the "Special Nursery" and I thought that might be where she was, so I followed them. I entered the nursery and asked to see my baby. I was told I should not be in there and the nurses seemed startled and nervous that I was, but I said I hadn't signed any papers as yet and so she was still my child and I wanted to see her. … I asked to hold her and they did let me hold her for a few minutes but then said I had to go or they would be "in trouble" for letting me in. The next day, I went again and asked to hold her and they said "no" - again, because it would cause "trouble".. so that time, I just stood by her crib for a while and she held my finger in her tiny fist. … But - the next day I went again and she was gone.[692] [1975, KEMH]

5.83 Mothers also described kind staff taking a risk and bending the rules for them out of compassion:

> [Boyfriend's Name]] and I saw our son only once. I regretfully but obediently kept away from the nursery viewing window, but just before I was due to be discharged [Father] insisted we would try: our last chance! "What have we got to lose? What can they do? Throw you out? You want to get out, so let's just go and have a look!" So there we stood, his arm protectively around me, both nervously peering through the nursery viewing window trying hard to see my name on the cards on the rows of white covered bassinettes on stands, one holding our baby son.

689 Submission 82.

690 Submission 59.

691 Submission 47.

692 Submission 1.

A nurse looked at us, and after hesitating and looking cautiously around, lifted a baby out of a bassinette and carried him over to the window and furtively held him up for us to see closely. We stood gazing at him. I could feel [Father]'s hand on mine, his thumb gently stroking the back of my hand, soothing and calming. His arm holding me close, whispering to me, 'If I try to talk, I'll cry. He's so beautiful. He's just like you.' We stood staring, throats tight. …I was overwhelmed, staring, trying to imprint the image of that little face on my mind. I was desperate to capture it before he was gone … I can see that tiny face even today. I have the picture of his little face engraved on my memory forever and will always be grateful to that unknown nurse and would love to thank her for that gift; one of the most precious I have ever received! Our little baby boy, we weren't allowed to see, or touch, kiss or hold in our arms … at least just once![693] [1957, KEMH]

I wanted to see my baby, but I was denied. … I continually requested to see my baby but a nurse told me that my baby was going to be adopted. I was heartbroken to hear this. I cried for three days asking to see my baby. One nurse felt sorry for me and took me to see her in the adoption area of the hospital. I held her in my arms and began crying that much they took the baby from me saying that this would upset the baby.[694] [1968, KEMH]

When I went back to Ngala the following day, one of the mothercraft nurses who had just started working there was a girl I used to work with at the GPO in Forrest Place. She told me that there were less staff on a Sunday and arranged with me to come to see my baby at the back door, with my mum in attendance as well. I could hold him for only five minutes because if she got caught, she would lose her job. She was compassionate in her action in taking that risk for me. I was grateful beyond words for that small opportunity to touch my baby's face and kiss him and tell him how much I loved him and always would love him. Mum held her first grandchild, if only for a minute.[695] [1971, South Perth Community Hospital]

A kindly young nurse with a foreign sounding name on the ward quietly asked me five days after the birth and the day my foster mother left Perth if I would like see my baby, suggesting I might live to regret not seeing her for the rest of my life. She led me down to the newborn nursery and put my daughter in my arms and left us alone in a quiet corner of the nursery for 15 precious minutes. I could tell my baby knew who I was from my voice and the way she wrapped her tiny fingers tightly around one of mine and stared at me intently. For a moment I thought about grabbing her and running … but I was too physically and emotionally exhausted to run. In in an act of cowardness or contrition I let the nurse take her from me …..[696] [1973, KEMH]

When my biological mother gave birth to me, she did not get to see me. I was immediately removed. I have since learned a nurse took pity on my biological mother, and secretly arranged for my biological mother to see me. The brave nurse hid my biological mother in a cupboard, and then brought me to the cupboard. My biological mother sat in the cupboard and was able to hold me for five minutes before I was taken away again.[697] [1981]

So, within a week of returning back from King Edward, she then flew back to Exmouth, and I come across from King Eddy about a week after I am born. So we

693 Submission 81 (ellipses in original).

694 Submission 115.

695 Private individual 23, transcript of evidence.

696 Submission 124a.

697 Submission 134.

> are both in the same building at the same time, and there was no encouragement or process for people to be able to go and see their baby. My mum thought she was not allowed to, so she did not ask, but she had a midwife come say to her, "Do you want to come and see your daughter?" And my mum was like, "Are you sure? You're not going to get in trouble?" She is like, "Yes, come on. Let's go." She takes my mum up to see me in the nursery. So, she got to see me just the one last time before she leaves. It seems like there are staff in Ngala who are thwarting the system because they know that mothers need to be able to see their baby. Whoever that midwife is, thank you. Whoever she is, and I know there would have been lots of them; they played a huge role in trying to soften a cruelty.[698] [1972, Ngala]

5.84 Other mothers were only allowed to see their children on the day they were leaving or once they had already left:

> on the day of my "release". The deputy matron took us up to the nursery and into a small side room where there was a crib (my beautiful baby girl [name]). Mum rushed over and picked her up, I was so emotional I couldn't even talk, the deputy matron quietly took [my daughter] from mum saying the only person who has the right to hold her at that time was her mother. She handed her to me, I could feel the bond we'd had during my pregnancy, with tears flooding down my face I kissed her and promised that one day we would meet again somehow.[699] [1969, KEMH]

> The day I left I was allowed to hold my daughter with a matron present for a very brief time. It was two weeks after I had her. And even though she was still mine, I still did not feel like I had the right to be able to hold her any longer or see her.[700] [1970, Hillcrest]

> My final memory was the first and last time I saw my daughter for 17 years, my parents took me back [to Ngala] (I think something to do with the adoption process) and I was given my daughter to hold. I can still feel her in my arms 51 years later[701] [1971, Ngala]

5.85 Women also described that they were only given access to their children to facilitate them consenting to adoption.

> I still had not signed the adoption papers and was asked to do so again. Again, I refused and said that I had not seen my baby so how did I know she existed? … How could I give someone up that didn't exist. Matron and my Mother looked at each other and Matron nodded. I was beckoned to follow her. She took me and my Mother to the baby wing and into the nursery. [Father of child] followed. I was led to a cradle and the label on the cradle said "baby [mother's surname]". How? I had been told, and believed, that my baby had already been adopted and was taken away. They had all lied to me. Many times! Here she was. Thick black hair. Asleep. I went to touch her and was reprimanded. We don't wake sleeping babies until their feed time here! I looked at my Mother and [Father of child] and screamed! Look at what you are making me give up! I ran out of the nursery; dress wet from milk leakage and ran outside. My heart and soul were truly broken, and I knew they would never be mended.[702] [1966, Ngala]

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698 Private individual 1, transcript of evidence.

699 Submission 103.

700 Private individual 15, transcript of evidence.

701 Submission 94.

702 Submission 108.

> They told me … if I wanted to see him now I had to sign the papers.[703] [1970, St Anne's]

5.86 One mother explained that, the day after she gave birth, the social worker bribed her into agreeing to adoption with the promise of a hold, saying:

> if I agreed to adoption - they would make sure I got to hold 'the baby'. Weird writing this, I had totally missed that the reason for me not being able to touch the baby stopped right after .... WTF how did I not see that till now? Before … my touch was somehow going to contaminate and make it impossible to bond with anyone… afterwards, if I agreed to adoption touching wasn't a problem, social worker would even make sure it happened![704] [1979, KEMH]

5.87 After agreeing, this mother was told she would not get to hold her child unless she signed consent to adoption. After being discharged and signing consent, she described returning to the hospital:

> Straight after signing I went and saw my baby … Instructed to scrub my hands, put on a gown and have a vague feeling may even have had to wear a mask. Told to sit down by a small dark haired woman who then handed me my baby. This woman then sat on a chair directly in front of me and watched intently. After what seemed a very short time, she said 'that's enough' baby was removed from my arms and I was told to 'go now'. That was it.

FINDING 5

Some mothers were given restricted access to their newborns. The separation of mothers and infants was not consistent within and across public and private hospitals and institutions.

Mothers were not told, or told lies about, where their babies were

5.88 It is clear from the inquiry evidence that many mothers did not know where their babies were. Some did not know that their babies were already with prospective adopters, including in the hospital at the same time as the mother:

> from my son's explanation that he was told that he was taken from my loins to the people in the next room. I understand that they would not have been allowed to be taken home in view of the fact that he needed to be checked out. The letters I have from the department do indicate that he was there for five or six days and then they took him.[705]

5.89 Other mothers were told that their baby was already with the prospective adopters, only to realise long after the fact that this was not the case:

> The nuns were informed that my baby was to be adopted and so she was removed immediately from the delivery room, without allowing me to see her or hold her. I was told a few days later that she had already gone to her new family, which I was to discover many years later to be a lie.[706] [1968, St Anne's]

> I pulled out my paperwork and read through again to find out how long my daughter was at Ngala before she went to her adoptive parents. … So – when she was taken away from the nursery on [date] … they took her to the Kensington

703 Submission 151.

704 Submission 98.

705 Private individual 24, transcript of evidence.

706 Submission 43.

> Annexe so I could not find her. Then she went to Ngala [3 days later]. This was unknown to me.[707] [1975, KEMH]
>
> I left the hospital 3 days after my son's birth. Before I left, I asked where my son was and was led to believe that he was with his adoptive parents.[708] [1981, KEMH]

5.90 One mother thought she had left her child behind when she left the hospital, only to be given him back to care for once she reached the institution.

> There was a nurse in the ambulance with me. As we drove away from the hospital, there was a great void within me. I was lost. I was bereft. I then heard a sound. It was a gurgling sound. It was the sound of a baby. Well, it was my baby. I kept still. I froze. They might take him away again.
>
> Then back at Hillcrest there I was with my baby. The Salvation Army Officers expected me to totally care for him. "We have enough to do. Look after him yourself". Five days of not being able to see my baby – then he is thrust into my arms. You look after him, she said. We are too busy.
>
> It was wonderful. My baby. The love flowed. After a few happy days I was called into Matron's office. I was told I could not stay any longer. … The Matron told me "You must make arrangements for the adoption". I was put in a taxi, with my son, and whisked away to Alexander Home. I had to leave him there. He was adopted from there. I went home. I went back to work.[709] [1957, Hillcrest]

5.91 To make them desist from trying to see their babies, women were lied to about where they were.

> The second inconsistency I would like to point out is … being discharged from hospital and asking to see my daughter—I record this in my diary—and I was told she was no longer at the hospital; yet it states on the adoption consent I signed in the Supreme Court five days later that she was still at the hospital in Subiaco pending placement for adoption.[710] [1973, KEMH]
>
> On [date], I was told my daughter was gone from the hospital. No – she was still in the hospital. It is in the paperwork. She had a blood test on that day at the hospital[711] [1975, KEMH]
>
> A week after giving birth I went back to Ngala to pay the bill and to see my baby. I asked to see my baby, they told me she wasn't there and I couldn't see her. The nuns intimidated me to leave. There was no encouragement or assistance given to help me see my baby.[712] [1979, Ngala]

5.92 New mothers were also told their newborn had died, when in fact this was not the case.[713]

5.93 In the evidence before the Committee, it is clear that women wanted their babies, and to see, hold and feed them at and following their birth. Just as removing newborns from unmarried mothers was not done consistently, the practice of extending the 'clean break' by preventing access was haphazard and made little sense. It was injurious to both mother and child.

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707 Submission 1b.

708 Submission 70.

709 Submission 60.

710 Submission 124a.

711 Submission 1b.

712 Submission 126.

713 Private individual 30, transcript of evidence and tabled paper 1. See also: Submission 59; Submission 110.

Separation practices facilitated consent for adoption. This is discussed further from paragraph 6.28.

5.94 Writing about forced adoption in New South Wales, Dr Cole observed:

> In Britain mothers were expected to wean their babies for at least six weeks, as that was the minimum time considered safe before separation. It was thought that if the infant and mother were separated too early it was exceedingly traumatic and caused psychological damage to the mother and physical damage to the infant.[714]

FINDING 6

Mothers were not told where their babies were, or were lied to about their whereabouts.

Institutionalising of infants

Mothers did not know that their children were left in institutions

5.95 Deprived of their mothers, newborn babies became institutionalised. They stayed in hospital nurseries, or were taken to other institutions. In some cases, this was the same institution the mother had been in previously. In other cases, the mother had never been to the institution.

5.96 Some mothers seemed to know that this would occur.[715] However, others were told that their babies had already been adopted, and had no idea that their babies were being moved around without their knowledge. And another group of mothers were themselves taken away from where their children were against their will.

5.97 Some of these examples refer to an additional site that KEMH began using in 1958, 500 metres away on Hensman Road, Subiaco. The building, a former private maternity hospital, was called Kensington House, so this part of KEMH was known as the Kensington Annexe. The inquiry evidence contained examples of:

- Both mothers and babies being taken to the Kensington Annexe[716]
- Mothers being taken to the Kensington Annexe and their babies remaining at KEMH[717]
- Babies being taken to the Kensington Annexe and their mothers remaining at KEMH[718]

5.98 Mothers and babies who were taken to the Annexe stayed under similar conditions as at KEMH, with babies in a nursery in hearing distance of their mothers, who were not allowed to see them.

5.99 Of her experience at St Anne's, one mother recounted:

> My baby was born at St Anne's Hospital in Mount Lawley in 1970. I wanted to go to St John of God Hospital in Subiaco, as I lived in Subiaco, but my gynaecologist said I could not go there as I was unmarried. Later I discovered St Anne's Hospital was an adoptive agency. The mother for my child was already chosen by the gynaecologist and solicitor for the hospital. They planned to take my child and give him to an adoptive mother with a sick boy in St John of God, intensive care. He was not expected to live. When my baby was born, her child was in intensive

714 Submission 72.

715 For example: Submission 103.

716 For example: Submission 56.

717 For example: Submission 13; Submission 73.

718 For example: Submission 1; Submission 124a; Submission 154.

> care for another 3 months. Consequently, my baby had to be in the nursery for 3 months.[719]

Mothers were moved away from their babies against their will

5.100 After giving birth, mothers described being taken from where their children were without their permission.

> Two days after the birth of my daughter Matron [Name] arrived at KEMH and told me I would have to return to Hillcrest. I screamed, I cried. I told the nurses that Archer wanted to steal my baby, to give her away to strangers. But no one cared. No one spoke to me. Matron [Name] took me by the arm and forced me to her car and drove me back to Hillcrest. I was too fragile to resist. I could barely walk, was very frail and dizzy, I had 12 stitches and my body was a bundle of screaming pain. I didn't know where my baby was.[720] [1968]

5.101 One mother who was transferred to the Annexe said she was drugged on valium at the time, and that she was taken there to sign the 'naming papers', which turned out to be consent to adoption order papers. Another states that she was driven a very long way around to get there:

> it seemed a long way away from KEMH. It was decades later I discovered the annexe was in the same suburb as the KEMH. I believe this deception was to prevent me from trying to see my child.[721] [1965, KEMH]

Babies were transported without their mother's knowledge

5.102 Inquiry evidence and parliamentary debate document an ambulance driver who was employed to transport babies from KEMH to the Kensington Annexe in the 1960s – he said there were as many as 5 babies a day who were thus moved without their mother's knowledge or permission.[722]

5.103 One mother did not know that her daughter had been taken to the Annexe, or that she was subsequently taken to Ngala – a place this mother had not herself stayed. When she asked to see her, this mother was told her child was not at the hospital and that she had already been placed with an adopted family, neither of which were true.[723]

5.104 Another mother, who was told her child had already been adopted, explained:

> I was told she had gone, when in fact she was still in the hospital - they had moved her from the Special Nursery (where I had visited her) to the Kensington Annex and not told me that was where she was. I had not signed any paperwork at that stage … The notes say I arranged for the baby to be placed at Ngala but there is no paperwork re this and I did not sign anything - apparently they went on the verbal information of [Ngala] Matron[724] [1975, KEMH]

5.105 This mother submitted her Department records to the Committee, and they are illustrative of the processes being followed by public servants at the time. The Department officer's handwritten notes say:

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719 Submission 151. See also: Submission 57.

720 Submission 50.

721 Submission 73.

722 Submission 59; Legislative Assembly, *Debates*, 2010, p 7888.

723 Submission 124a; Private individual 26, transcript of evidence.

724 Submission 1c.

> advised baby transferred to Ngala [date] - Checked with Ngala baby not there. Phoned Kensington Annex and I will pick up baby this p.m. and transfer to Ngala. Papers for Wednesday 2pm
>
> [Mother] has returned home. B.I. [Birth Information] not sighted. Mother's date and place of birth to be ascertained. Not on the files.
>
> [Mother] was admitted to Ngala [date] and returned home [date]. ~~She~~ arranged [inserted above: "with Matron"] for baby to be placed at Ngala after birth and Dept to handle adoption.
>
> Papers. Wed. 2pm to Mother.
>
> [in different writing:] Noted. For preparation of consents pls. [date] CLERK-IN-CHARGE [stamped][725]

5.106 These records demonstrate:

- at certain points neither the mother nor staff involved knew the child's location
- Department staff played a key role in transporting babies to facilitate their adoption
- there was coordination between the Department and KEMH, and between the Department and Ngala
- mothers were not the ones making arrangements for their children
- Department staff knew that children were being transported without the mother's knowledge or authorisation
- Department staff were outcomes focused and set dates for consent to be signed in advance
- Department staff kept careful track of the information necessary to pre-fill the adoption consent form
- senior Department staff supervised and approved these arrangements.[726]

Some babies were left in institutions for extended periods

5.107 Mothers consistently related the shock they felt when they realised that their children were not with their adopters, but had been left in institutions. Both mothers and adopted people expressed horror at the significant lengths of time this situation remained.

5.108 Of her and her Aboriginal mother's experience, one adopted person submitted:

> [My mother] returned with her partner (soon to be husband) to the hospital to pick up her baby. She was told that I had been sent to Perth and that I was not in the hospital anymore. In fact, I was still in the hospital, and remained there for about six weeks. These 6 weeks I believe I didn't have any bonding to anyone and had many nurses feeding and keeping me healthy.[727] [1958, Broome District Hospital]

5.109 Another witness testified:

> When I got my first non-identifying information … they told me that [my daughter] had been left at Hillcrest until the following [year] and looked after by a Salvation Army officer. I was totally devastated. I just could not believe she had been there

[725] Submission 1c [strikethroughs in original].

[726] The Clerks in Charge had a coordinating role within specific divisions of the Department, and reported to the Deputy Director of the Department (Department of Communities, email, 7 June 2024).

[727] Submission 148.

> all those months on her own without me. It just totally devastated me. … I was told they took her the day after I left Hillcrest.[728] [1970]

5.110 One mother's evidence included:

> I asked to see her again and was told she was no longer at the hospital and had already been placed with an adopted family. Yet it states on the Consent to the Adoption of Child document … she was 'at KEMH Bagot Road Subiaco in WA … I found out later, she was in fact [then] placed in Ngala … and instead cared for by a rotating roster of mothercraft nurses. Records show she was in fact at Ngala as a ward of state for 7 weeks and 2 days before she was placed with her adopters. As her primary caregiver I was never consulted or told this … Evidence suggests that mother-infant bonding and the quality of the mother-infant relationship can have a significant impact on a child's development, but my daughter was denied by state welfare intervention any form of maternal bonding or attachment for 51 days. It distresses me beyond belief to know that she was left alone and for all this time.[729] [1973]

5.111 While some babies were collected within a week or so of being born, the evidence reveals babies being left in institutions (public or private) for lengths of time ranging from a few weeks to over a year. There was one case of a child being placed for adoption just before their first birthday, and another just after.[730] One infant was in KEMH for 10 weeks (70 days), another at Hillcrest for 12 weeks.[731] Four cases in evidence are of 6 weeks,[732] and another four are of 7 and 8 weeks each.[733]

5.112 Of their early months spent in institutions, adopted people reflected:

> Forty-nine days—you know, I basically was a ghost. And from what I understand, it was overwhelming and nurses did not have time—just being left in a ward.[734] [1964, Hillcrest]

> After I was born, [mother's Name] was allowed to hold me briefly just once before I was confined to a plastic tub at King Edward Memorial Hospital for 70 days, alone and unloved and unwanted. I cannot tell you how many well-meaning retired nursing staff have reassured me that we were cuddled and loved, but all I can think of is how confused that traumatised tiny infant must have been by this succession of strangers who did not possess the scents and sounds and touch of the person that I had spent nine months preparing to meet.[735] [1972, KEMH]

> I was in Ngala for 51 days with no mum and no dad. I quite often wonder if the nurses held me or whatever. … the paperwork … says something about me having trouble feeding and having this facial palsy thing, and whether they were waiting to see if it was going to get fixed and whether my adopted parents were happy to take me because of that. I do not know.[736] [1976, KEMH]

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728 Private individual 15, transcript of evidence.

729 Submission 124a. See also: Private individual 26, transcript of evidence.

730 See: Submission 93; Private individual 15, transcript of evidence.

731 Submission 112; Submission 42.

732 Submission 38; Submission 148; Submission 149; Private individual 23, transcript of evidence.

733 Submission 120; Submission 124a; Submission 134; Private individual 4, transcript of evidence.

734 Private individual 4, transcript of evidence.

735 Private individual 17, transcript of evidence.

736 Private individual 28, transcript of evidence.

> On receiving paperwork from the Adoption Registry I discovered that I was discharged from King Edward Hospital in December 1975, nearly six weeks after my birth. I don't know what those six weeks were like, but I assume I wasn't held much, "touch therapy" didn't exist in those days so I was most likely held to be fed and then left in my crib again for those 6 weeks until my adoption. I will never know how that experience has affected my personality or my development because I don't know any differently.[737] [1975, KEMH]

5.113 Some babies were not adequately cared for while in institutions. One adopted person explained that she had thrush all over when collected by her adopters from Ngala at 6 weeks old.[738] Another child at Ngala was so sick he was returned to hospital.[739]

5.114 An adoptive parent testified that her adopted son had been neglected for 4 months between being born in Geraldton and collected from Hillcrest: he was underweight, had problems feeding and breathing, eczema, and what turned out to be a dairy allergy, none of which were addressed by staff.[740]

5.115 One adopted person also emphasised that important medical information about her was not relayed from KEMH to Ngala, or to her adopters, in 1972 so that her condition could be appropriately monitored.[741] She submitted that 'The clean break practice created a situation of unnecessary negligence for newborns'.[742]

5.116 While some parents did not know their children were in institutions, others were paying bills for their nursery care. Some eventually knew their children had been collected by their prospective adopters when the bills stopped coming: they were not otherwise notified.[743]

5.117 Researchers have demonstrated that stress on mothers while pregnant and interference with mother-infant interactions has behavioural ramifications for babies, including 'hospitalism syndrome', and can result in serious long-term impairments.[744]

5.118 In other cases, children were not adopted. The Committee received evidence of this being because they were deemed 'imperfect' and thus not fit for adoption, as well as a case where the mother did not consent to adoption.[745] Contributors included those who were instead fostered out:

> At a crucial time in my development when I should have been with my Mother, I was instead, handballed from hospital staff to social workers to a children's home and then to a foster family where my identity was erased.[746]

> I was born in November 1949 and my mother's father would not let her bring me home from hospital. As a result of this she left me behind as she departed the hospital, and I was made a ward of the state and placed in the receiving home. I was placed into foster care with Mr. and Mrs. [Name] at 3 months of age. I

737 Submission 38.

738 Submission 149.

739 Private individual 23, transcript of evidence.

740 Private individual 11, transcript of evidence.

741 Submission 110.

742 Submission 110.

743 Submission 110.

744 R Sullivan, D Wilson, J Feldon, B Yee, et al, 'The International Society for Developmental Psychobiology Annual Meeting Symposium: Impact of Early Life Experiences on Brain and Behavioural Development', *Developmental Psychobiology*, 2006, 48(7):583-602, pp 590-591, cited in Submission 72.

745 Submission 110; Submission 143; Submission 154.

746 Submission 29.

> contracted pneumonia soon after and again at 4 years of age – I am sure a result of the environment I was in.[747] [1949]

5.119 Submitters also stated that some newborns up for adoption died while in institutions, and their parents were not informed or given the chance to be involved in their burials.[748]

FINDING 7

Babies taken from their unmarried mothers were institutionalised, and some were left in institutions for extended periods, including several months and up to one year.

The newborn's legal guardian

Parents were ordinarily the legal guardians of their children at and following birth

5.120 Parents in evidence expressed fury at being denied their children, and state that they had a right to them. One mother, whose child was taken at birth in KEMH in 1957, submitted:

> Not knowing just how illegal and unethical their actions were then, I am extremely angry and frustrated even now over sixty-five years later. They had no rights, until I had actually signed the papers; because until then he was mine! And I didn't know my rights, because they lied to me … and all the other mothers like me.[749]

5.121 A child's parents were ordinarily considered to be its legal guardians. The legal effect of an adoption order was that adoptive parents became the legal parents, and therefore became the child's new legal guardians.

5.122 However, as noted throughout this report, evidence indicated children were removed and withheld from their parents, kept in institutions, and placed in the care of adoptive parents, prior to an adoption order being made. The status of legal guardianship was not as clear during this period.

5.123 From 1970 onwards, the Director of the Department was the guardian of the child where all necessary consents had been given (unless they had been dispensed with by the court). However, this did not include the period prior to the signing of all consents, and does not apply to the years of adoptions prior to 1970.

5.124 A continuation of the 'norm' would mean that the child's parents continued to be its legal guardians until consents were signed (or, prior to 1970, possibly until an adoption order was made). However, that norm could be varied by many factors beyond adoption legislation, including child welfare laws which authorised the removal of children and could place them under the guardianship of the state.

5.125 Adopted people submitted that their mothers were their legal guardians until signing consent, and many mothers are adamant that they were the legal guardians of their children at and after birth. For example:

> Every action done to me presumed adoption and I, under law, was her sole legal guardian and the only person who could give legal consent. This is stated in their own brochure encompassed in my submission. … My parents, the doctor, the hospital staff and the Welfare Department were not the legal guardians of my daughter—I was. … All of these actions presumed adoption without consultation with me, her natural mother and sole legal guardian. The Adoption Act did not come into play until the consent was signed. So under what act was my child

747 Submission 143.

748 Submission 110.

749 Submission 81.

> abducted from me at the moment of her birth and what constitutes duress, which was deemed unlawful under the Adoption Act at that time.[750] [1968]

5.126 Dr Cole submitted that:

> the act of giving birth entitled [an unmarried mother] to the full legal control and custody of her child and to deny her access was as unethical and illegal as it would have been to deny a married mother[751]

5.127 The brochure referred to above at paragraph 5.125 was submitted and forms Appendix 6: *WA Government information on illegitimacy*. It is annotated as originating from the Health Education Department of WA in February 1972. The submitting mother's experience occurred prior to this date. No mothers with lived experience around this time or otherwise mention receiving this or similar information. The information states:

> WHO "OWNS" THE BABY? Parents of a schoolgirl daughter are her legal guardians. That being so, many parents think that if the daughter should give birth to an illegitimate child, her parents automatically become the legal guardians of the baby. That is not so. The mother is the legal guardian of her own baby.
> If the baby is to be made available for adoption, it is the young mother who must sign the consent form. … As guardian of her baby, the mother must, of her own free will, sign the consent form, but not before the eighth day of her confinement, unless certified as fit to do so by a doctor or certified midwife. Of her own choice, she may not have seen the baby at all. She may have left the baby in the hospital and have returned home with her parents. But she is still guardian of, and responsible for the child until she has signed the consent form. At that stage, the Director of Child Welfare becomes the legal guardian of the baby, to the exclusion of all other persons until the adoption goes through.

The offence of child-stealing

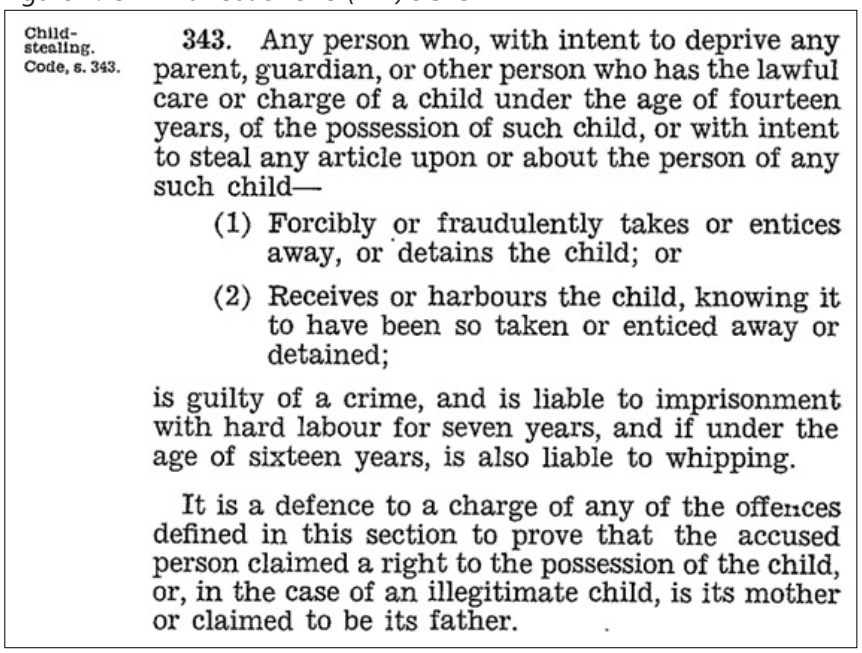
5.128 Some contributors have referred to the removal of children following birth as 'illegal', 'kidnapping', and 'child stealing'.

5.129 Child-stealing is a crime under section 343 of the Criminal Code. It has been a crime since the passing of the Criminal Code in 1913. A copy of this 1913 section is included at Figure 7. Broadly speaking, child stealing as prescribed in the Criminal Code would include some conduct described to the Committee.

750 Submission 59 (emphasis in original).

751 Submission 72.

Figure 7. *Criminal Code 1913 (WA) s 343*



Child-stealing. Code, s. 343.

343. Any person who, with intent to deprive any parent, guardian, or other person who has the lawful care or charge of a child under the age of fourteen years, of the possession of such child, or with intent to steal any article upon or about the person of any such child—

(1) Forcibly or fraudulently takes or entices away, or detains the child; or

(2) Receives or harbours the child, knowing it to have been so taken or enticed away or detained;

is guilty of a crime, and is liable to imprisonment with hard labour for seven years, and if under the age of sixteen years, is also liable to whipping.

It is a defence to a charge of any of the offences defined in this section to prove that the accused person claimed a right to the possession of the child, or, in the case of an illegitimate child, is its mother or claimed to be its father.

5.130 However, as seen above, the final paragraph of this offence contains a defence to the charge, by proving that the accused person 'claimed a right to the possession of the child'.

5.131 For each instance before the Committee, no evidence was provided about the legal basis or authority (if any) which was, or may have been, relied upon by public servants and private hospital staff when removing children or preventing access to them prior to the signing of consents. There is insufficient evidence for the Committee to comment further in a general sense, and the Committee does not seek to provide a view regarding specific cases.

Post-natal care

New mothers continued to be shamed and treated without care after giving birth

5.132 While still in hospital following giving birth, women described feeling alone, frightened and invisible.[752] Some had no visitors, others had a few.[753] Staff told some family not to visit.[754] One mother explained that no one told her own mother about the baby's birth. The grandmother only found out when visiting.[755] Some grandparents were turned away when they came to the hospital wanting to see their new grandchildren.[756] One mother reported that Department staff instructed her father to threaten the newborn child's father with rape when he tried to visit.[757]

5.133 After birth, some mothers were surrounded by married women who were allowed to keep their babies, and they felt the impact of the stark contrast.

> Stupefied from drugs and the labour I slept and woke next morning at about 6am in a shared ward with about 16 other new mothers. Babies were being wheeled in to be fed by their mothers, but not mine – this was heartbreaking and extremely confusing to experience. … I spent the remainder of my time in the ward sobbing

752 Submission 82; Submission 109; Submission 112.

753 Submission 103.

754 Submission 59.

755 Submission 50.

756 Submission 109.

757 Submission 59.

> uncontrollably. … A female photography came to my bedside at 9am on Monday morning to take photos of new mothers and their babies[758] [1968 KEMH]
>
> the isolation, mostly. I was put in a room with other women, I cannot remember how many but they all had babies and everyone was coming in with flowers and I was not getting any visitors. I was not allowed any visitors, so I was pretty miserable.[759] [1968, Osborne Park Hospital]
>
> After the birth I was put into a ward with 6 other women, where I had to watch and listen to babies coming and going, being nursed and cooed over. Was this my punishment?[760] [1970, St Anne's]

5.134 The lack of care shown to mothers during their antenatal visits, labours and births continued after birth. Mothers reported that their wounds were not treated adequately and they suffered from infections and septicaemia. One mother suffered complications from a retroverted uterus for years that was never picked up or treated in her stays at KEMH and Hillcrest post-partum. A GP sent another recovering mother to a different hospital for further treatment and the medical staff referred to the St Anne's doctor who performed her episiotomy as 'a bit of a butcher'.[761]

5.135 One adopted person explained the disregard shown to her mother following her birth:

> At 10 pm I was extracted from my mother's body via suction and forceps delivery. These medical interventions badly damaged my mother's perineum. Her delicate skin was sown together by the same medical officer that performed the 'cut down', chose to not wait the few minutes required for the local anaesthetic to provide pain relief for my mother and performed the excruciating painful suturing repair procedure.[762] [1972, KEMH]

5.136 New mothers continued to be treated without consideration or respect, and to be shamed, after giving birth.

> Some student doctors had fun, or practice, stitching me up. It was a cobbled up mess … Later, lying on my bed in the ward, the nurses would pull the curtains closed around my bed, not taking particular care, leaving gaps. My backside on a pillow, my legs wide open, bent up at the knees, with the healing, heat lamp casting its warm glow on the tears and stitches to heal the cobbled-up mess. The doctor would walk past during inspection time then with no warning, the curtains were rudely pulled aside for anyone to see me in a most unbecoming position, to enable the student doctors to see the progress of their handiwork. I heard one of them make a derogatory comment about the position of my legs, the reason I was in that hospital and my marital status as though I did not exist, as the others laughed. Like an exhibit in the zoo! When I compared notes later, we were treated like second-class citizens: less than animals.[763] [1957, KEMH]
>
> Sobbing in pain, bereft and receiving no sympathy as a single mother, I was treated like a pariah. I was shown no compassion. I battled to maintain my personal pride.[764] [1968, KEMH]

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758 Submission 37.

759 Private individual 24, transcript of evidence.

760 Submission 7. See also: Submission 70.

761 For example: Submission 7; Submission 104; Submission 109.

762 Submission 110.

763 Submission 81.

764 Submission 37.

> I was then instructed to stay in my room and to shower at night to prevent anyone —seeing me. I felt totally inhuman, deeply ashamed, worthless and terrified.[765] [1968]

> There were only two nurses who treated me with any compassion and kindness. … The regular and permanent staff went out of their way to be unhelpful and downright nasty for the duration of my stay.[766] [1969, KEMH]

> I was not treated nicely. The name that this nurse called us was horrid. She is probably still alive. If she ever read the *Hansard*, she would hate to read it. We were treated like scum. Okay, we made a mistake, but it was not like it was a mistake, it was torture. Can you imagine having a baby in a room crying? Automatically, a woman's breasts will lactate, but you could not go in or look in. You were told that you are only such and such and you will never do it again … The nurse called us sluts.[767] [1970, KEMH]

> When I woke from my general anaesthetic and with my many stitches, I was on a general ward (I think) and the nursing Sister told me to collect my things and she made me walk, carrying my bag and personal items, to the annexe where they kept the single mums away from the ward with mums who had babies. Again I was told I was being moved to "not upset the mothers" because I was crying, as if I was not a mother. I was groggy and in pain from my episiotomy and asked if she would help me and she scoffed and said no, I could carry my own things. I was never offered a wheelchair, which I think should have been the protocol for someone still unsteady on their feet.[768] [1975, KEMH]

5.137 At this point, one mother explained that she did not yet understand the Department had decided her child would be adopted:

> A woman from CWD [Child Welfare Department] came to see me and she said she was happy it was a girl as there was a shortage of girls. I thought I was happy too because it was what I wanted. I didn't understand at the time, what she meant.[769] [1968, KEMH]

Mothers were sedated after birth

5.138 New mothers reported that they were kept drugged to keep them calm and make them compliant.[770] They explained that the effects of medications given made it hard to keep track of time or to try and access their babies. For example:

> It is curious because [my mother] has such a very strong memory. She does not forget things, but she cannot remember anything from that week. I suspect that she was drugged[771] [1965 KEMH]

> There is a *vague* recollection of being given drugs in the hospital after the birth and I took drugs after I was discharged … Until six months ago, when I received discharge and admission dates from scant hospital records, I believed I had been in hospital the day my daughter was born and taken home the next day. Records show that I was in hospital for four days. Four days that I have no recollection of

765 Submission 59.

766 Submission 104.

767 Private individual 16, transcript of evidence.

768 Submission 1.

769 Submission 115.

770 Submission 73; Submission 124a.

771 Private individual 22, transcript of evidence.

> other than very fleeting moments. Yet I can remember my previous stay in that hospital at the beginning of my pregnancy, very well indeed. … Years later, I asked my mother why she never came to see me during my labor and stay in hospital. It was a lifelong hurt that I cannot forget. Her response was that the hospital told her I was sedated and asleep and not to come. … My parents, the doctor, the hospital staff and the Welfare Department were not the legal guardians of my daughter—I was. Did I ask to be sedated for nine or ten hours during my labor and the duration of my subsequent stay in hospital?[772] [1968, Devonleigh]

> I had an epidural, so pain relief was not the motive behind the administration of morphine, in black and white there is the prime reason there was no contest when they took my son from me.[773] [1979]

5.139 One mother, herself a registered nurse, related that after giving birth at KEMH she went for a post-natal check with her private obstetrician. When she queried the adoption, he referred her to a psychiatrist who admitted her as a psychiatric patient at the Mount Hospital in Perth, then a public facility.

> On admittance to The Mount, the Nursing Sister on duty handed me some pills. When I asked what they were, she said, "just take them because they've been prescribed by the doctor." I refused, as, as a trained nurse, I wished to know what it was that I was being asked to take. I was classified as a "difficult and uncooperative patient". I was given a single room, which I do not remember ever leaving nor seeing any other patients. Nor was I provided with any counselling or therapy sessions that I recall. I do remember that during my stay at The Mount, [Father of child] visited, stood by my bed and said, "I don't love you, I'm not going to marry you and I will never see you again" and walked out. Feeling shocked, confused and in a panic, I ran after him. I was quickly surrounded by nursing staff and forcibly overcome. I was injected with something that I suspect was Paraldehyde, and fell unconscious. … I remember that my brother visited with some friends. Later they said to me, "you looked so funny, your head was rolling around the pillow and your eyes couldn't focus". Other than this I have no memory of my time at The Mount, I was sedated the whole time.[774] [1968, KEMH]

5.140 As this mother states that only the Department social worker had the father's contact details, her evidence raises questions about the coordination between private doctors, public hospital medical staff and the Department.

5.141 This mother was drugged as if psychologically ill when she had just had her newborn child taken from her. This classification had long-term implications as she continued to be prescribed serious psychiatric medications, be subjected to courses of Electro-Convulsive Therapy [ECT] and other treatments and was moved in and out of psychiatric facilities for the following 10 months. When doctors eventually listened to her story, they explained:

> I had no and had never had any form of diagnosable mental illness, and that I had experienced and was suffering from the effects of deep trauma, grief and loss. That the grief and pain did not end with the birth and adoption.

5.142 After giving birth and losing her second daughter to adoption, another mother was institutionalised in Graylands Hospital and other similar places, forcibly sterilised, and treated with ECT and drugs for schizophrenia. These treatments did irreparable damage, and she lost

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772 Submission 59 (emphasis in original).

773 Submission 98.

774 Submission 37.

her ability to speak, write and think well. Years later a psychiatrist determined that she had never had schizophrenia.[775]

5.143 While sedated, mothers signatures were sought on forms to register their children's birth.[776] The implications of this are discussed in the next chapter.

Mothers received mixed care from doctors after birth

5.144 Some contributors explained that they were treated with kindness by doctors who attended them after birth. These experiences of being inquired after, listened to, explained the physiological changes occurring to them post-partum and given details about their newborns stood out to them amidst the cruel treatment they otherwise received.[777]

5.145 However, similar to the mother described above whose GP sent her to a psychiatrist, another mother described being insulted and dismissed when she sought help:

> I returned to the Doctor a few weeks after the birth of my daughter with a raging infection from the birth. I did not understand what was wrong with me – I was deeply embarrassed and ashamed, I felt like I was rotting from the inside. I broke down, sobbing uncontrollably - I was missing my baby. Why couldn't I have her with me.? I asked. He did not look up from his desk. He told me I was selfish, it was too late - she was with a wonderful couple who were rich and she would not want for anything. He wrote a script for anit-biotics, did not examine me and virtually tossed me out of his office. He did not tell me I could revoke my consent. My daughter's adoption order was finalized six months after that visit – all he had to do was make a phone call that day on my behalf, as the irrevocation period had not been restricted to 30 days at that time. From that day on, I got the message – I was a nothing, a no-body and I was just dirt – it did not matter if I died.[778] [1968]

Mothers who returned to institutions received further ill-treatment

5.146 A few days after giving birth, some mothers returned to the institutions they were in prior. Some of them were taken against their will. Mothers recalled doctors visiting them there and checking their stitches.[779] Some did not receive adequate medical attention, as described above from paragraph 5.134.

5.147 Mothers submitted that they were degraded by staff once they had had their babies:

> The first night back a night nurse came around, pulled the blankets back , shone the torch as she pulled at my knickers and humiliated me as she told me how disgusting I was.[780] [1973, Ngala]

FINDING 8

Unmarried women experienced discrimination in both the general and medical treatment they received during labour, while giving birth, and after birth. For some, this included obstetric violence and being administered medications without their knowledge or consent, and/or without medical necessity.

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775 Submission 42.

776 For example: Submission 98. See also: Private individual 22, transcript of evidence.

777 For example: Submission 82; Submission 108.

778 Submission 59.

779 Private individual 27, transcript of evidence.

780 Submission 150.

Discharge from hospital

5.148 Mothers described the unceremonious way they were discharged from hospital without their children:

> We entered that place together my child and I, I walked out alone. I have no memory of leaving there, how I got back to the Alexandra Home, but I remember that my baby was not with me, as though he had never been, or existed.[781] [1957, KEMH]

> My heart was broken, the little girl I wanted had been stolen from me and there was nothing I could do. I had to leave the hospital without her. When I got home, my sister asked "Where is the baby?" I told her they wouldn't give her to me. I couldn't cope with all I had been through. Every part of my mind, body and soul was broken. The only way to cope was to drink large quantities of alcohol. My life was not worth living. I was in the gutter now and had a nervous breakdown. I have never recovered from losing my little girl.[782] [1968, KEMH]

> After five days I was considered fit enough to be returned to the Hillcrest Maternity. I was wheeled along the hospital corridor towards the exit doors. Crying inwardly because I was leaving my baby behind. I wanted to run and take him in my arms. My arms were so heavy. They were primed to hold him. They were ready to hold him. I would never see him again – or ever know where he was.[783] [1957, Hillcrest]

5.149 An Aboriginal adopted person described her Aboriginal mother's experience:

> As soon as I was born, I was taken away. My mother only got to see my black hair, no first contact, no being able to see me. Just left with nothing but a fleeting sight on my head. She was then discharged, without her baby.[784] [1958, Broome District Hospital]

5.150 Another mother described the difficulty of subsequently leaving her child behind when she left Ngala after her post-partum stay:

> I do recall stumbling as I walked down the stairs when we left because I was distraught—very distraught.[785] [1969, Ngala]

5.151 When they left the hospitals or institutions they had stayed in following birth, mothers explained that there was no post-natal care or check-ups arranged, and no offers of counselling.[786] Most mothers left without any proof of ever having a baby. Mothers experienced cognitive dissonance at being ejected back into their prior lives. They had nothing to show for their pregnancy, as if nothing had happened after experiencing such a significant and traumatic life event.

> I never received even a piece of paper to show I had given birth to a child, until I was able to make application for the proof, thirtyfive years later! My only proof;

781 Submission 81.

782 Submission 115.

783 Submission 60.

784 Submission 148.

785 Private individual 5, transcript of evidence.

786 Submission 52; Submission 104; Submission 124a; Submission 126; Private individual 15, transcript of evidence.

> stretch marks, stitches and engorged breasts … and a broken heart![787] [1957, KEMH]
>
> I would have liked to keep my wrist band but wasn't allowed to.[788] [1966, KEMH]

5.152 Other women retained objects that attested to them having birthed their children:

> all [my mother] had left of her PRECIOUS DAUGHTER was a stupid "Dedication Certificate" from the Salvation Army that depicted [my sister's] name, date of birth … and place of birth[789] [1950, Hillcrest]

5.153 One other mother was able to retain her birth ward identification, shown in Figure 8.

Figure 8. *KEMH wristband recording child's birth details kept by a mother in 1972*

[Source: A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, pp 151-152, in Submission 112]

Severing of the mother-infant bond

'Clean break' separation practices did not benefit mothers and babies

5.154 Last century evidence reveals how psychological 'clean break' theory was put into practice by staff dealing with some unmarried mothers and their babies. The practice applied to mothers and babies at the moment of birth:

> The clean break was an intentional practice … separation was so rapid, the newborn had left the room before the final stage of labour, when the placenta was birthed.[790] [1972]

5.155 The extension of 'clean break' thinking also underpinned the prevention and restriction of access between mothers and newborns following birth, as well as the subsequent secrecy of closed adoptions.[791]

5.156 Submitters laid out a number of purported purposes served by 'clean break' separation practices, as follows:

- prevent the mother missing her baby or suffering any loss
- prevent the baby missing its mother
- prevent the mother wanting to keep her baby
- enhance bonding between baby and adoptive mother.[792]

787 Submission 81.

788 Submission 22.

789 Submission 85.

790 Submission 110.

791 Submission 110.

792 Submission 72; Submission 110.

5.157 At the time, the psychological theory supporting immediate separation was as follows:

- bonding between mother and baby began at birth
- therefore, if a mother and baby did not see each other, they would never notice one another's absence or miss one another
- seeing her baby would activate a mother's 'maternal nature' and then 'she would "fight harder" to keep it'[793]
- newborns are a 'blank slate' with no memory or attachment to their mothers
- bonding is based solely on a baby getting its needs met
- therefore anyone who nurtures a baby is equal to its mother
- *alternatively*: removing a baby from its mother would hurt, but would hurt less if it happened immediately and quickly.[794]

5.158 Dr Cole emphasised that this patriarchal theory lacked scientific foundations, stating, 'The impact of breaking the bond was never researched though anecdotal evidence of the damage caused was available for decades'. Her PhD thesis cites writing beginning as early as 1919 on the harm of separating mothers and babies. For example, in 1953, the paediatrician Dr John Bowlby presented that:

> it should not be forgotten that emotionally mother and baby are one unit and the mother's protective feelings are especially strong while her baby is small. Therefore, if he is removed from her care she, at least, will suffer[795]

When I finally gave birth to a son in the early hours of the morning, the nurse would only let me hold him for one minute and said, "We don't do that here." … You cannot imagine that pain of handing your child over and you want it; you want that child.

- Private individual 25, transcript of evidence

5.159 The WA apology refers to forced adoption practices being well-intentioned, aimed at a balance between minimising the impact on mothers and 'what was considered at the time to be in the best interests of the child'. However, Adoptee Rights Australia submitted that, for much of the inquiry period, 'the evidence-base supporting adoption was at best highly controversial, and at worst, indicated that adoption was likely to provide a negative outcome for the child then adult'.[796]

5.160 Subjective assessments of what was good for children clashed with consideration of their fundamental rights, understandings of which crystalised during the period. The principles laid out in the 1959 United Nations *Declaration of the Rights of the Child* include that:

> special care and protection shall be provided both to him and to his mother, including adequate pre-natal and post-natal care.
>
> …

793 Submission 72.

794 Submission 72; Submission 110.

795 Dr J Bowlby, 'The Effect of Separation from the Mother in Early Life' (Address delivered by invitation to the Irish Paediatric Association, Dec 30 1953), *Irish Journal of Medical Science*, 1954, 6:121-126, p 123, cited in Submission 59 and Submission 72.

796 Submission 128.

> The child … shall, wherever possible, grow up in the care and under the responsibility of his parents… ; a child of tender years shall not, save in exceptional circumstances, be separated from his mother.[797]

5.161 Practitioners may or may not have been aware of the existence of human rights charters and scientific knowledge that ran counter to 'clean break' theory. However, Dr Cole points out that there was a clear discrepancy between this popular theory and its real-world application, explaining that, 'Certainly those taking the babies were aware of the grief'.[798]

5.162 The idea that removing babies at birth was a 'kindness'[799] is called into question by the above evidence showing that, in WA, 'clean break' separation practices were implemented unevenly. This suggests that some – and some senior – public servants and private institution staff never truly believed the 'no harm, or less harm' scenario when separating mother and baby. If this was actually the case, then the instances of mothers being shown or given their children after birth would have been cruelties. 'Clean break' theory does not logically account for the practices documented in the inquiry evidence. It would have been clear to many involved in facilitating forced adoptions that, as applied, 'clean break' theory was 'absurd'.[800]

5.163 However, the concern of junior staff members who bent the rules makes it apparent that staff at hospitals and institutions were expected to enforce separation practices. One mother gave evidence that she had 'had nursing staff who were involved in encouraging adoption apologise to me for the process'.[801] A witness testified that nurses she later met 'felt awful about the process that they had had to deal with as part of their normal workplace practices'.[802]

Some mothers and babies were separated because it was expedient

5.164 By contrast, it appears that the intersection of 'clean break' theory around the time safe and reliable baby formula was introduced made mothers redundant in the eyes of staff and led to the development of strategically employed separation practices that were in essence simpler, easier and more effective for staff than any alternatives.

5.165 The implication of the fact that mothers were, at times, given access to their babies, either out of compassion or to facilitate their consent, is that restricting that access was knowingly punitive, cruel and coercive.[803] In some cases, it served as a means of intentionally bribing, and extorting, mothers.

5.166 The efficiency of separating mothers and children in obtaining mothers' consent to adoption is discussed further in the next chapter from paragraph 6.28.

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797 United Nations General Assembly, 'Declaration of the Rights of the Child', 841st plenary meeting, 20 November 1959, *Resolutions adopted in the reports of the third committee, General Assembly–Fourteenth Session*, accessed 23 May 2024, p 20.

798 Submission 72. See also: Submission 154.

799 Submission 110.

800 Submission 110.

801 Submission 94.

802 Private individual 27, transcript of evidence.

803 In relation to the idea that adoption practices and outcomes were what unmarried mothers somehow 'deserved', see Dr D Higgins (Australian Institute of Family Studies), *Impact of past adoption practices: Summary of key issues from Australian research. Final Report to the Department of Families, Housing, Community Services and Indigenous Affairs*, Australian Government, 2010, accessed 11 June 2024, p 14.

Mother and infant are a dyad

5.167 Contemporary scientific understandings of physiological connections between mothers and newborns debunk the assumptions of 'clean break' theory. Namely:

- bonding between mother and baby begins in utero and continues after birth
- both mother baby are profoundly affected by each other's presence (or absence) after birth
- mother and baby are primed to respond to one another before birth
- newborns are attached and attuned to their mothers at birth
- bonding is based on complex biological, emotional and psychological processes
- to a baby, any other caregiver is not the equivalent of its mother.[804]

5.168 Dr Cole's research explains that, rather than preventing suffering for mother or baby, 'clean break' practices had disastrous effects on both. She summarises relevant research as follows:

> The first hour after birth is possibly the most critical in the life of the infant and has a profound and life long effect on the mother … The mother and infant are a dyad, not two separate entities. A mother therefore is not interchangeable with a 'primary caretaker' who has not had the nine month history in which to develop such a deep connection on multiple layers of being … The infant is biologically attuned to its mother, no other woman can take her place, and if separated from her will feel pain … and that pain is remembered … The infant after birth still feels as if it is part of its mother. The mother similarly feels as if her infant is an extension of herself.[805]

5.169 Accordingly, one adopted person submitted that 'The very word "adoption" is misleading. Adoption is what happened next – after the main trauma – it should not be referred to as adoption – but SEVERANCE'.[806]

Separation practices caused immediate and ongoing trauma for mothers

5.170 In their evidence, mothers documented their states after giving birth and having their babies taken away:

> My mind was numb yet my body was struggling and bereft.[807] [1968, Osborne Park Hospital]

> I felt totally inhuman, deeply ashamed, worthless and terrified. I have little recollection of my stay in hospital. I remember babies crying outside my room at times and just being curled up frozen with fear—numb. I remember just one shower—late at night—as per cruel instructions. I stood weeping, sobbing as I looked down at the water running over the sagging, empty sack of my belly. My baby was once inside me, protected; now they had taken her—she was gone.[808] [1968, Devonleigh]

> I was devastated that part of me was gone I didn't even get a look at her or nurse her they just took her away. I was lying their in pain while they were stitching me up. Knowing she was gone. I held the pain in my heart for a very long time hurt &

804 Submission 72.

805 Submission 72.

806 Submission 14 (capitals in original).

807 Submission 109.

808 Submission 59.

> embarrassed at what I had to go through as a young girl. When I had to leave the hospital, I asked my mother if I could keep hr again; she had to drag me out of the hospital into the car. As she said no again.[809] [1971]

> If I had felt scared, traumatized and very, very confused before her birth, I felt totally abused, abandoned and exploited after. … My hormones were in overdrive, my blood pressure was still elevated and I was deeply distressed by the foreseeable forced removal of my baby from my care.[810] [1973, KEMH]

5.171 A mother submitted that separation was an act of violence perpetrated against both parties:

> For a baby to be denied their own Mother and a Mother to be denied her own baby is tantamount to torture of the highest degree. If babies could talk can anyone really believe they would say" I don't want or need my Mother "you must tear us apart at birth", " I don't want her in my life, she's not married and or isn't financially secure to provide for me, so therefore unworthy?"[811] [1973, St Anne's]

5.172 An adopted person submitted a letter his mother wrote him following his birth, which he received only after her death many years later. He describes the letter as 'a time capsule from an Australian labour ward, imbued with the primal pain of all those mothers who had their children ripped from them':

> I love you so much it hurts and fills me with sadness. I just want to die because I don't think I could go on without you the[re] beside me. Help me my son. Help me. … I want you more than ever now, so please help me [son's Name]. As I need you so badly. … I love, I love, I love my son please don't forget me for I shall never ever forget you. My love you for is gently, sweet, peaceful passionate and so deep, but also sad, burning love at the same time I just don't what I am going to do without you.[812] [1972, KEMH]

5.173 The brother of a WA mother who had her child removed in 1968 entreated:

> I ask any of you who may be mothers, think about it. Think about being made to have no choice – but render the very soul you body has nurtured, protected and fed, with every fibre of your nature, the hormones, the physiological changes that have taken place to ready for delivery.[813]

5.174 A counsellor from ARCS testified:

> I would like us to think about … women not being able to see their babies, babies not being able to be held by their mothers, or fathers, but mothers. I do not know if you are parents, but after birth, the impulse to want to hold your baby, the baby wanting to be held, to not allow that and to forcibly not allow that. For women who came back to the hospital begging to change their mind, begging to see their child, and not being allowed to, that has to have lifelong ramifications, does it not?[814]

5.175 Chapter 9 explores the grave and lifelong impacts that trauma caused by separation practices had on mothers, as well as adopted people.

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809 Submission 116a.

810 Submission 124a.

811 Submission 6.

812 Submission 112.

813 Submission 8.

814 J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

Unmarried mothers were expected to resume normal life

5.176 Mothers were expected to return to their previous lives after giving birth and having their children taken away as if nothing had happened. They were told to get on with their lives, to forget about it, and that they would get over it.[815] Some were picked up from hospital and never asked anything about what they had just experienced.[816]

5.177 Mothers recalled:

> I was to forget about my baby and … get on with my life! Stupid, useless, empty words reverberated down through the years! It was impossible to forget him - so simple to say, impossible to do. … "You can have more when you get married … there's plenty of time … you're only young"! More brain-washing as though there were fears we might buck the system; you can replace him! – Like an old dog with a puppy? This authoritative indoctrination, with firm opposition toward anyone who tried to object to their collective wisdom, came under the guise of advice, from all levels, the doctor, matron, sisters and nurses. I was told, "You will forget about it', and 'get on with your life! - Everyone does.' 'You can have another one - when you get married, one of your own." One of my own? He was my own! Not only was I his mother, [name] was his father: he was our son. This is fact and can never change whatever laws were in place and whatever papers signed. They were a false reality for someone else![817] [1957]
>
> I don't remember how long I was in hospital before being told to forget all about my baby and what had just happened and to get on with my life. … I am amazed that there was no counselling offered during my pregnancy or after. I was just expected to put the pain, hurt, and sorrow at what I had done away and forget it ever happened. I was supposed to forget the baby I felt growing and moving in my body, that I talked to each day. My only hope was to completely block it out of my mind.[818] [1967]
>
> On my return to Melbourne I took a job in the city away from hospitals, as my mother insisted that I, "keep busy and resume [my] life as if the birth never happened." So naïve, yet this was the advice my mother received from our Melbourne GP.[819] [1968]
>
> It took all the strength I possessed to behave as if I were a normal person. I hoped that no one knew what was going on in my mind and I desperately missed the daughter I had never seen.[820] [1968]
>
> I was told to stop snivelling and Get Over It. IT what the hell, she, was a baby born into this world by me, she was their first grandchild, and they had the gall to tell me to forget HER, NEVER for as long as I live would I ever forget my 1st baby girl. … Forget it I am told, IT was a part of me my child, not an IT, how can any mother forget her own child … I was not allowed to grieve.[821] [1969]

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815 For example: Submission 104; Submission 124a; Private individual 15, transcript of evidence; Private individual 23, transcript of evidence; Private individual 25, transcript of evidence.

816 Private individual 21, transcript of evidence.

817 Submission 81.

818 Submission 52.

819 Submission 37.

820 Submission 50.

821 Submission 103; Private individual 5, transcript of evidence and tabled paper 1.

> Just go away and forget what happened. I've tried to forget to see if it is possible, its not.[822] [1969]

5.178 Many mothers explained that, though they tried to pick up where they'd left off, they were in deep depression.[823]

> I didn't know what to feel anymore. I was truly lost. I had no-one and no-one wanted me. I was criticised for having a baby at just 16 years of age and would never amount to anything. I wanted to kill myself.[824] [1966]

> I returned to teaching during the second term of that year. Life must go on. I struggled with day to day tasks, both at school and at home. I realized later that I was suffering from post natal depression[825] [1970]

> When I was home, I was just trying to pick up pieces of my life. I went into severe depression, having panic attacks.[826] [1970]

5.179 As explored further in Chapter 9, these experiences had a lasting impact:

> Our bodies and minds will never forget and forever remain confused, stuck and traumatized by these events - horrific events which butchered our maternities and stole our children at birth.[827] [1959, Devonleigh]

Separation practices caused immediate and ongoing trauma for adoptees

5.180 In their submissions, adopted people who were not adopted for extended periods wondered how they were affected by being separated from their mothers at birth:

> I always wonder how the three months left in a crib with no mothering affected my personality and my development.[828] [1949]

> Later, I do the maths. That was seventy days after I was born. Seventy long days, alone in a crib. Did my tiny lungs scream for my mother? Did they drug the formula to sedate me? How exactly did trauma manifest in this un-nurtured infant, tiny hands grasping for a mother who will never return? How much of the wiring in my brain was altered forever by those long days and nights?[829] [1972, KEMH]

5.181 The impact of separation on babies at birth is well documented in the scientific literature reviewed by Dr Cole:

> It is now understood that the mother serves as a biological and emotional regulator for her infant … Being taken from one's mother is internalised by the infant as being 'unwanted' and rejected. … Damage to the amygdala (involved in the fight and flight mechanism) in early infancy is accompanied by profound changes in the formation of social bonds and emotionality. … If a baby is removed from its mother and placed in a nursery it encounters two unknown states: silence and stillness, for which it has "no genetic encoding for handling" …. The experience of being separated from mother's body, with whom it is still completely identified … is traumatic for the infant. Stress hormones continue to be produced whilst the

822 Submission 104. See also: Private individual 15, transcript of evidence.

823 For example: Submission 109; Submission 124a.

824 Submission 108.

825 Submission 7.

826 Private individual 15, transcript of evidence.

827 Submission 59.

828 Submission 143.

829 Submission 112.

> infant screams and even when he or she goes quiet …. hundreds of studies have proven that after the birth it is necessary for the mother and child to remain with each other. "…research has proven that the worst kind of birth is where the child is unceremoniously snatched and deposited in a nursery with other terrified children". [830]

5.182 Adopted people themselves submitted as to the immediate impact of their removal:

> I was left in the hospital for two weeks before my adopted family came to collect me. They tell me my feet and hands were bound as I was scratching myself so badly. I can only assume this was trauma related to me being taken away from my mother.[831] [1967, KEMH]

> On day 2 I was transferred to the special care nursing as I had failed to establishing feeding. The notation under remarks on the neonatal nursing notes, state, 'Not interested in feeds'. This is a sign of neonatal distress, a consequence of my removal from my mother.[832] [1972, KEMH]

> My life began with trauma. The most terrifying thing a baby or child can feel is the loss of their mother. Their mother is their anchor to the world and their way into learning about the world as being safe.[833] [1966]

5.183 This submitter emphasised that all adopted infants are subjected to trauma:

> We must acknowledge that the clean break of adoption was forced upon ALL newborns deemed for adoption. Irrespective of one's adoptive experience growing up, all adopted people have been exposed to the catastrophic neonatal grief, and the pre-verbal trauma of losing our mother at birth.[834] [1972, KEMH]

5.184 As well as skipping foundational attachment milestones with their mothers,[835] removed babies also missed out on being celebrated at birth, and welcomed into their wider families and communities. An adopted person explained:

> When I was born there were no celebrations, no handshakes, no smiles, no laughter no hugs, no hi-fives, no balloons, no flowers, no cheers, no comfort, no congratulations, no cards, no cuddles, no conversations, no family gatherings, no phone calls, no comparing looks, no pride, no joy, no snuggles, no love. There was however bucket loads of guilt, shame, fear, coercion, manipulation, lies, heartbreak, confusion, loneliness, tears, and sadness. There were no grandparents, there was no father, no siblings, no celebration whatsoever.[836] [1973]

5.185 ARCS clarified that, counter to 'clean break' theory:

> Children suffer from the brutal severance of ties to their mother and family. Children are not a "clean slate".[837]

5.186 In addition to the immediate consequences, research shows that being removed at birth also has ongoing and long-term effects on adopted people, including impairment of ability to

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830 Submission 72.

831 Submission 67.

832 Submission 110.

833 Submission 14.

834 Submission 110.

835 Submission 110.

836 Submission 119.

837 Submission 113.

deal with stress, to socialise and form meaningful relationships, and negative impacts on adult physical and mental health.[838] Jennifer McRae summarised:

> We know newborns can identify their mother at birth via their senses, and we know that newborns actively choose the comfort of their mother over all others. Research within the field of neonatal psychology has long identified that the removal of newborn infants from their mothers inflicts profound life-long consequences and forms the psychological bedrock upon which the adopted person's life is founded.[839]

Adopted people remember the trauma of being separated from their mothers

5.187 Counsellors from ARCS gave evidence that, even if they cannot recall it, adopted people carry the embodied memories of their removal:

> Ms NEWBOULD: Well, I think it has been well researched. You might not have a cognitive memory, but you would certainly have a body memory, and there is lots and lots of research around that, not just with adoption, but the impact on attachment of babies whose attachment relationship has been severed or is compromised. It is really difficult for adopted people because, you know, they say "Oh, you were a baby; you couldn't be affected." And people do not want children or babies to be affected, so, you know, it is like they are silenced then, and even silencing themselves: "Why am I feeling these feelings?" So, they definitely are affected by trauma, but probably have less permission. I do not know how you compare them.
>
> Ms DE CINQUE: And lacking the language of that cognitive memory makes it really difficult to describe an experience and a feeling that you do not have words for.[840]

5.188 Especially if they occur at critical times such as around birth, the brain retains early emotional memories, according to researchers.[841]

5.189 One adopted person was a twin, whose brother died shortly after birth. She reflected:

> I think trauma, like for me in particular—I was 49 days at Hillcrest. I do not know what happened there. There was no record. There were 49 days of no attachment. I lost my brother. I lost my mother, and then I was handed over to someone I did not even know.[842] … I thought I was just a 'f***ed up' person no idea the impact of separation as a neonate and left in hospital would have lifelong effect. … My safe place was taken away the moment I was separated from my mother and twin and all my life I have suffered from this. … A neonate has a major trauma from the moment of birth she or he does not recognise that previously there had been a place of safety so therefore can not rationalise that there are places that are safe. My safe place over time has become my isolation and the disconnect from people allows me to be safe I cant be rejected or abandoned once again.[843] [1964, Hillcrest]

838 Submission 72.

839 J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023.

840 J Newbould, Manager and Counsellor, and K de Cinque, Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

841 Submission 72.

842 Private individual 4, transcript of evidence.

843 Submission 58.

5.190 Another adopted person submitted that, even as an adult in a committed relationship, her body feels terrified that she will be abandoned as she was at birth.[844]

5.191 Others explained that their subconscious is deeply imprinted with their removal:

> When I was little, I had a reoccurring nightmare. I called it my "yogurt dream" because I could smell strawberry yogurt. It was terrifying. This big yogurt wave was coming towards me, and I could hear men saying, "get her, she's coming". I felt helpless and panicked and certain what was coming was worse than death. I think now that this nightmare was a memory of my birth. I think I knew in the womb that I was to be taken away from my mother. That I wouldn't be held and cherished by my family as their new member. I knew I was being born to be cast off. Discarded. Sent to be with strangers.[845] [1966]

> Having been deprived of any close mother/child bond, and the disruption of the process of attachment in the vital early stages of life development has been most damaging. Deprived and separated at birth of emotional security and social autonomy my main source of comfort was to suck my thumb, especially going to sleep until I was 18. For three weeks I was left in the orphanage without the loving care, close contact and connection of my mother, where the subconscious primal need became a wound in my heart and life, and the deep damage done by barbaric practises to an innocent baby wrongly robbed off her rights before she even breathed.[846] [1968, KEMH]

> My memory of my clean break is stored within my subconscious. My dreamworld, especially as a child was filled with my earliest perceptions of the world and being removed from my mother. 'My entire life I have a reoccurring dream, where instead of freefalling into the dreamworld, I plumet through a long red hued darkness and into my little new-born body. I am alone. I whimper gently for my mother to come and rescue me from this place; I wait for her to appear. I listen for the sound of my mother's voice but there is nothing but a deathly silence. I am very tired and so hungry. I will be safe when mother comes, and I can finally sleep knowing she will protect me. Where is my mother? Desperation fills my body; I scream in fear. She still does not come. No-one comes. I am still and silent. I wait for death to come and end my suffering'.[847] [1972, KEMH]

FINDING 9

Separation was experienced as trauma by both mothers and infants.

The identities of both mothers and babies were compromised by separation

5.192 After having grown together for 9 months, the separation of babies and mothers compromised both of their identities. Mothers submitted:

> All victims as first time mothers were deprived of completing the transition from maiden and mother, this is a foundational moment in feminine self identity. The retained innate wisdom that her child is the reason for being but being told she is not capable nor enough to parent erodes away at the psyche. This denouncement of the most basic of human abilities leaves the doorway open, the victims are *mother's yet not enough to be mothers*. The angst may be salved for a while but it

844 Submission 46. See also: P Sunderland, Life Works, *Adoption and addiction: remembered not recalled*, accessed 24 October 2023.

845 Submission 14.

846 Submission 117.

847 Submission 110.

> remains and a ghost kingdom of what could have been takes up the space. Without this being addressed the suffering will continue.[848]
>
> Both adoptees and mothers have identity problems. The adoptee, because he or she has been taken from everything that is familiar: his or her mother. … The infant has internalised its mother's odour, taste, heartbeat, voice, emotional and speech patterns as home, a point of familiarity, safety and wholeness. When born the infant kept with its mother does not feel any disconnection it feels just as at home as it did within the warm waters of the womb. … The mother's identity is permanently changed, she can never go back to who she was prior to her baby's birth … She finds herself in alien psychological territory, she is certainly a stranger in a strange place. Her motherhood is more than made invisible, it is annihilated, therefore her identity as mother is annihilated.[849]

5.193 In most cases, it was in these states of pain and confusion, without even knowing their newborns' whereabouts, that mothers were made to consent to adoption. The processes used to obtain that consent are the subject of the next chapter.

848 Submission 98 (emphasis added).

849 Submission 72.

CHAPTER 6
Consent, permanent separation and placement

6.1 This chapter examines the means by which the children of some unmarried mothers were formally and permanently lost to adoption.

The legal significance of consent

6.2 While the legal framework for adoption changed significantly over the course of the 20th century, as considered in Chapter 3, a constant feature was the requirement that a child's mother provide her written consent to the adoption. While it was possible to seek the dispensation of that consent so an adoption could proceed without it, this was only done in limited circumstances, and at the discretion of a judge. To ensure an application for adoption had the highest likelihood of success, the mother's consent was required.

> For myself and the hundreds of other women who relinquished and our children I would like these questions answered: Were the adoption consents we signed ever legal?
>
> - Name withheld, submission 124a

6.3 As noted in Chapter 2 when considering the term 'forced adoption', the force applied against mothers, fathers, and their families took various shapes. Most of that force was applied in connection with obtaining the necessary consents, and upholding them once they had been obtained.

The concept of consent

6.4 The concept of consent has a long social history. As a legal concept, it is often seen in a modern setting at the forefront of contractual disputes, medical treatment, and allegations of sexual abuse.

6.5 Attitudes and expectations towards consent have developed over time, both socially and legally. Certain standards have emerged, including that consent must be:

- informed
- given by a person with capacity to consent
- given prior to the action being consented to
- freely given.

The forced adoption practices within the evidence before this Committee often infringed upon one or more of these modern standards of consent.

6.6 The standards for consent, both socially and legally, at the time of events considered by this inquiry may have differed significantly from modern standards. The requirements for consent in relation to adoption specifically were set out within the adoption legislation, with increasingly specific constraints over the course of the 20th century. The development of adoption legislation is considered in greater detail in Chapter 3 of this report.

Legal consent in historic adoption

6.7 The Adoption of Children Act provided for consent to be evidenced in writing. Later amendments varied the particulars of this written consent, but it was always to be given in writing.

6.8 Later amendments introduced the concept of 'defective consent'. From 1970 onwards, defective consents included:

- consent that had not been given in accordance with the Act
- consent obtained by fraud or duress
- consent that had been properly revoked
- an instrument of consent that had been altered in a 'material particular' without authority
- consent from a person who had not been in a fit condition to give the consent, or did not understand the nature of it
- consent signed by a mother before the birth of her child.

6.9 Where it appeared to a judge that an application for adoption was relying upon a defective consent, the judge was to refuse to make the order of adoption. As considered in Chapter 7, the nature of applications for adoption meant that it was unlikely a judge would be provided with information indicating defective consent (aside from consent prior to birth, which would be evident from the dates on paperwork).

6.10 From 1970 onwards it was also an offence to coerce a mother in relation to adoption. The introduction of this offence was not in response to concerns about the Department or institutions. It was intended to address potential coercion by the fathers of children (and their families).

6.11 The introduction of these provisions does not mean that prior to 1970 it was considered acceptable or proper to coerce a person into giving consent. However, it does confirm that by 1970 it was widely, and legally, considered improper to do so.

6.12 The Committee notes that while mothers in evidence were faced with giving their legal consent to adoption, adopted people were removed from their family without their consent.

The legal impacts of improper or defective consent

6.13 Even where a consent involved in making an order of adoption was invalid, defective, or improperly obtained, the adoption order will still stand. However, a court may discharge an adoption order if it is satisfied that it a consent relied upon was not an effective consent because it was obtained by fraud, duress or material inducement. Chapter 15 considers the discharge of adoptions in further detail.

Birth registration papers

Information used to register births was relevant to obtaining consent for adoption

6.14 Registering a birth and consenting to adoption were 2 separate processes. However, the information obtained when registering a birth was often used in forms for adoption, including the consent paperwork. It was important that these details were consistent across documents, as any inconsistency might be noted by the judge determining an adoption application, which could lead to delay or the failure of the application.

6.15 The registration of birth became an important part of processes for adoption. Mothers in evidence commonly referred to signing a 'Birth Information Paper', which was a form from the Registry of Births, Deaths and Marriages (BDM) tied to the registration of birth. Some provided copies of this document.[850]

[850] For example: Submission 98.

6.16 Generally, the details on this form had already been completed by the time it was given to mothers. In some cases it listed a name for the child that was not the name given by the mother.[851]

6.17 Evidence contains claims by mothers that they endured treatment from 'social workers' at KEMH that would amount to harassment by modern standards, pushing them to sign the Birth Information Paper. One mother was woken up to sign the paper on the day she gave birth. Mothers were also under the influence of drugs when signing the Birth Information Paper. Some women are listed as informants on their children's original birth certificates but have no recollection of filling out or signing such forms.[852] Some women are listed as the informant for the form, but they did not sign the paper at all.[853] Some women's details on the form are incorrect because they did not fill in the paper themselves.[854]

6.18 Once a birth was registered, evidence suggests the Department ordinarily held a copy of the registration for their purposes.

6.19 One mother explained that the Department obtained a copy of her child's birth registration without her knowledge or authority, and she was not provided with her own copy.[855]

Omission of fathers' details from birth records had implications for consent in the adoption process

6.20 Whether or not fathers were recorded on the birth register was a separate matter, but highly relevant, to the matter of consent to adoption for both mothers and fathers. As set out in Chapter 3:

- Until 1970, a father's consent to the adoption of his illegitimate child was required.[856]
- After 1970, fathers' consents were not required for the adoption of illegitimate children.[857]

6.21 Even when a father's consent to adoption was legally required, there were circumstances in which an adoption could proceed without it. In the earliest legislation, this included that where a father had deserted their child, his consent would not be required (which at the time was the same in relation to a mother). Following the 1949 amendments, the father's consent could be dispensed with, but the judge would need to provide their reasons for doing so within the order. However, generally prior to 1970 a father's consent to adoption would be required.

6.22 Where a woman was married, her child would be presumed to be the child of her husband. However, for unmarried mothers, there was no presumed father. For many reasons, unmarried mothers might not provide the details of a father for their child's birth registration, and the registration would then proceed without a father being listed.

6.23 After 1963, in addition to the mother providing his particulars, a statutory declaration from the father of an 'illegitimate' child declaring his paternity was necessary in order for him to be entered as such on the birth register.

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851 Private individual 7, transcript of evidence.

852 Private individual 22, transcript of evidence.

853 Private individual 26, letter of correction.

854 Private individual 7, tabled paper 1.

855 Submission 124a; Private individual 26, letter of correction.

856 See *Adoption of Children Act 1896* s 5(7).

857 See *Adoption of Children Act 1896* s 4A.

6.24 Staff neither advised unmarried parents of this, nor assisted them to obtain or submit the required documents. Some that met with fathers alongside mothers took their details but did not explain this requirement.[858] As a result, from 1963 onwards, fathers of illegitimate children were often not listed on birth records.

6.25 After 1970, the presence of fathers on birth registrations did not have a significant effect upon the adoption process, as their consent was not required. However, prior to 1970, having no father listed on birth records likely benefited those seeking adoption, because it could be used to suggest that the father was either unknown or disinterested (or deserted) his child, supporting the dispensation of his consent to the adoption.

Whether consent was freely given

6.26 Many forced adoption practices benefited those seeking a child's adoption, by disadvantaging mothers, misinforming them, and placing pressure on them to do what was demanded. In many cases the signing of necessary consent paperwork was the culmination of these practices. This paperwork was the last part of the adoption puzzle that required the mother's involvement. Once the necessary signatures had been obtained, much of the pressure being applied came to an end, as those responsible disengaged from any involvement with the mother.

6.27 Many of the practices described were coercive or fraudulent, either in their own right or in combination with other practices.

Separation practices effectively facilitated adoption

6.28 It is clear that babies were taken from their mothers prematurely. If unmarried women truly intended for their children to be adopted, there was no reason for them to be denied access to them in the period up to their giving consent for adoption.

6.29 However, as laid out in Chapter 5, both public servants and staff in private institutions were operating under the presumption of adoption outcomes. This led them to treat mothers as if they had *already* signed away their parental rights. To many mothers who had not yet signed consent – whether they were unsure if they would sign consent or they simply did not consent – their separation from their children at birth seemed irreversible. As infants, adopted people were also treated as if they were under the legal guardianship of strangers, and denied access to their mothers, to breastfeeding, their fathers, and their wider families.

6.30 In practice then, separation practices made adoption a *fait accompli*, wherein mothers and fathers were treated as not having legal guardianship or the power to make decisions about what happened to their children, and therefore had less power over them.

> When the baby arrived, a nurse went to put her on my chest. Another nurse very loudly said, "She can't see or hold the baby. It's being adopted." I feel that if I had my baby with me for the five days I was in hospital, I would have changed my mind.[859] [1964, South Perth Community Hospital]

> All I asked was —Where is my baby? to be told she was gone. What message does that give to a terrified young girl at her most vulnerable? It says that people you trust to look after you and your baby are **so powerful** that they can do anything they want to do, if it suits their purpose and this destroys your trust for ever. … I had just been through a process in the hospital which created such a deep profound belief that I was a nothing, less than human, a body that created a baby

[858] For example: Private individual 14, transcript of evidence; Private individual 26, letter of correction.

[859] Private individual 21, transcript of evidence. (This mother believes she signed consent to adoption at 6 months pregnant.)

> for some one else. I had no sense or thought of entitlement to my own child.[860] [1968]
>
> The only thing weaker than a young, terrified mother giving birth is her tiny newborn baby. At the mercy of doctors, hospital staff and adoption agency workers - mothers were isolated, assaulted, drugged, restrained, coerced, bullied and denied any access to their own infant.[861] [1968]
>
> We stayed there for the two weeks. Like I said, just being able to see these babies through the nursery window was like this constant torture, really—just constant. But that is where I felt the power was taken away because even though our babies were still ours, we virtually just did not even think that we had the power to say, "I want to be able to go in and hold her. I want to see her." It is just terrible to feel that you cannot even—any autonomy has just been stripped away.[862] [1970, Hillcrest]
>
> One of the things that really needs to stop is these departments and service providers thinking that they can tell people who are suffering this awful trauma how they should speak. They are told, "I gave my baby away for adoption." How can you give a baby away for adoption when it was ripped off the delivery bed? That is ridiculous. You are still in labour. Third stage labour has not even happened and the baby is gone and you have given that baby away and nobody will let you see it. That is crazy![863] [1973]
>
> Silly me. I had no experience with babies being born to other mothers and thought it was normal that babies were taken away at birth and you having you had to prove you were good enough to parent and you wanted them was the norm and this happened to all mothers. I have since found in 1979 it was not general practice for babies to be kept separate from mothers. Enforcing separation and using that to procure agreement to adoption was a systematic process reserved for those identified as easy prey.[864] [1979, KEMH]

6.31 Unmarried mothers were not necessarily vulnerable; however, many were made vulnerable by the way they were treated and the removal of their newborns. A mother submitted:

> The opening line of the 2010 WA Apology states: *Today we recognise the experiences of those mothers who were pressured into relinquishing their babies when they were emotionally vulnerable and under duress.* However, my diary illustrates that we were *emotionally vulnerable and under duress* BECAUSE we were being *pressured into relinquishing our babies*.[865]

6.32 In her submission, Dr Christine Cole summarised the efficacy of separation for obtaining consent:

> The trauma caused by interfering with the birth process was so severe it silenced the mothers and traumatised infants … The biology underlining the birth process, the interference with and resultant physical and mental health problems … The act of not allowing mothers to see their infant imprinted on their mind that they were

860 Submission 59 (emphasis in original).

861 Submission 59.

862 Private individual 15, transcript of evidence.

863 Private individual 14, transcript of evidence.

864 Submission 89.

865 Submission 124a (emphasis in original).

> powerless and isolated, less than human and so 'unfit' that they weren't even afforded the dignity of completing the birth process[866]

The torture of separation practices worked hand-in-hand with brainwashing

6.33 Evidence revealed that the separation of mothers and babies was a form of torture which had the following effects:

- 'it traumatised the mother into silence'
- 'it facilitated attachment between adopter and infant'
- 'it protected the staff from witnessing the mother's distress'
- 'it made the mother hyper suggestible'.[867]

6.34 Dr Cole's thesis suggests that removing babies from their mothers at birth and sedating them both a) gave effect to the messages they had already received about being unfit to mother, and b) primed them for accepting these messages after birth such that they were tricked into signing their consent to adoption.

> It was well documented in the psychiatric literature that a traumatised individual found it difficult to speak because intense trauma induced disassociation and amnesia states, not only in the present, but for decades … The hyper suggestibility was further enhanced by military style mind altering drugs that interfered with higher cognitive abilities that impeded the decision making …, this has been labelled: narco-induced hyper suggestibility
>
> …
>
> So when mothers were told "to go home and forget they gave birth" or that they "would go on and have children of their own one day" or "you're selfish if you keep your child" or "you must choose adoption because it is in the best interests of your child" or "there is a wonderful married couple that can give 'the' baby all the things you cannot or the most touted and misused excuse: 'in the best interests of the child' … these suggestions were uncritically accepted and had the same effect as a post-hypnotic suggestion.[868]

Coercive messaging and harassment continued after birth

6.35 Submissions and testimony to the inquiry consistently describe that the pressure to adopt-out that women were placed under while pregnant did not cease once they had given birth.

> I have a faint recollection that I was told to sign the adoption papers only a few days after giving birth. … I had been conditioned and constantly told that the baby wasn't mine.[869] [1967, St Anne's]
>
> Following discharge from KEMH hospital, the pressure was on from the social worker to sign the adoption papers. This went against everything I felt and believed. I felt strongly that it was wrong for me and my son to be separated and for him to be raised by others, when I was fully prepared to raise him as my own.[870] [1968]

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866 Submission 72.

867 Submission 72. For discussion of forced adoption as torture and organised violence, see Chapter 11.

868 Submission 72.

869 Submission 52.

870 Submission 37.

> Consent was obtained through fraud and duress: I had been subtly coached over a three-month period to believe that adoption was in my daughter's best interest and this is what I understood in signing under oath. It was a gross abuse of power and, as my diary entries show, my consent was fraudulently obtained. [871] [1973]

6.36 In some cases, the pressure to adopt-out intensified. For example: one mother had a surreal experience on the day she gave birth, when she was under the influence of medication, in and out of sleep, and continuously moved from ward to ward. She described:

> The social worker I had met a couple of months before came to my bedside - many times, often waking me up to tell me how I had to agree to adoption and this needed to be done quickly. Conversation went along the same lines every time. Firstly social worker told me how beautiful my baby was, they had been given the nursery name of '[Name 1]' by the nurses then asked if I had made up my mind about adoption. When I asked why couldn't I have the baby - it was because they wouldn't bond with their (adoptive) mum if I touched baby and if I didn't agree to adoption for baby it would stay in foster care until eventually being made a ward of the state. I couldn't see, hold or even touch the baby was made very clear. She would finish by saying it has been 1, 2 or 3 days and you need to hurry up and make up your mind about adoption or baby will be put in foster care. On the third day (or what I believed to be the third day) social worker came in 'they' couldn't wait any longer it's been three days, the baby needs a name did I have one yet? After I said yes, social worker went away and came back to rather gleefully tell me they had given 'the baby' a name - it was short and sweet – Name - sign here.
>
> …
>
> Little did I know the baby was going into foster care one way or another, that lying bitch never told me the truth at any time. I have no doubt, social worker had done this many times over and knew exactly what they were doing and still believe today that I would never have parented that child. *Before I left the hospital I had a time to sign consent and a time after this when I was to see the baby.* Records state I was discharged one day after the day I gave birth. So I was in hospital **one day not three** as I had **believed for over 30 years**. I have firm recollections of being in three different beds, one in a large common area with lots of beds and the other with only a couple of beds and finally a bed in a room by myself where I had visitors. I still find it difficult to reconcile that I was only there for only one night as I know that I was in at least two different rooms after leaving the recovery room which seems strange if I was only there for one night! Maybe this was reason enough for morphine on top of an epidural – to 'help' me believe a different reality as the social worker portrayed?[872] [1979, KEMH]

6.37 Another mother explained that, both prior to and following birth, she was repeatedly told "if you love them, you will give them up".[873] Of the post-partum period, she explained:

> I changed my mind about adoption quite a few times while in hospital and informed the nurses of this. When said this the hospital would ring the social worker who would come and see me do the big spiel and would talk me out of keeping my son[874] [1981, KEMH]

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871 Submission 124a.

872 Submission 98.

873 Private individual 7, transcript of evidence.

874 Submission 70.

Department staff threatened and extorted mothers to obtain their consent

6.38 After one mother was bribed with the promise of holding her baby once she agreed to adoption (see paragraph 5.86), she was told that it would not happen *unless* she signed consent.

> Any mother placed in the same position would not and could not do anything but sign, the basic human drive to hold and see their child is an undeniable driving force. A primal human need was very, cruelly manipulated by those I had been taught to trust and obey.[875] [1979]

6.39 Mothers were also threatened that if they did not sign, their children would become state wards. For example:

> Counsellors with the Adoption Research Council tell me that I had been placed into deep trauma. I remember parts of the interview with the social worker telling me the wonderful virtues of the adoptive couple whom I believed already had my baby in their possession. I was then shocked even further to learn she was still at the hospital and she had been left there. They were going to place her in a foster home (which I thought was an orphanage)… if I did not give consent and this was just too much. My head was reeling having just learnt that she was still at the hospital and no one was loving her and comforting her. I was just sixteen, deeply traumatized by my experience and being told information that was traumatizing me further. I signed a consent not believing I had any power or rights at all.[876] [1968]

6.40 After giving birth to her second daughter, one mother was told that if she did not consent to adoption her first daughter would be taken off her and made a ward of the state. The son of that adopted person submitted on his mother's behalf:

> Her birth mother was threatened by the hospital matron stating that if she did not sign the adoption papers, her 14-month-old daughter would be forcibly removed and rehomed. Her birth mother was scared and insecure by this prospect as they were both already known to the state welfare authority so she believed the threat. In hospital, her birth mother had expressed concerns about her ability to raise two children and this, combined with her unmarried status, seemed to label her as an unfit mother. Instead of receiving guidance and being connected with possible services and options, or being counselled through this challenging decision, she instead received an impossible and unthinkable ultimatum.[877] [1972, Armadale Kelmscott Memorial Hospital]

Coercive practices continued up to the point of signing

6.41 The inquiry evidence depicts the pressure that mothers were subjected to up to and including the very signing of consent documents. Mothers describe being directed to sign and submit paperwork consenting to adoption. Appointments were made for them. Some were escorted to the Supreme Court by Department staff.[878] Some attended reluctantly. No mothers described seeking to provide their consent, or assistance with doing so; rather, it was expected of them, prearranged for them, or simply demanded. In general, mothers speak of signing consent not as something they actively did but as something that happened to them.

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875 Submission 98.

876 Submission 59. See also: Submission 48.

877 Submission 68.

878 For example: Submission 73; Submission 124a.

> a Miss [Name], from the adoption agency phoned and instructed me to be at the Supreme Court the following day to sign the adoption papers. I was bewildered and asked about my son and the people who were adopting him. I was told that no information could be given. The woman was very abrupt and I felt that this was further punishment.[879] [1970]

6.42 Mothers recalled that pro-adoption messaging continued right up to the moment they signed their consent to adoption. For example:

> it was our intention to marry and raise our child. In the interview regarding consent taking, I was lied to, the virtues of the adoptive parents were coercively promoted and no information was given as to how I could keep my child. Furthermore, I was deeply traumatized at the time of the interview (7 days after birth) by having my baby forcibly removed at birth. To give consent you have to have the capacity, full disclosure to what you are giving consent to and information about choices available. I had none of the above.[880] [1968]

> I was given papers to read and told to sign them. I was having second thoughts again and voiced this to those in the room. Once again, I was coerced and given the full speech ending with "if you love your son" you will give him up for adoption. I relented and signed the papers. So did the baby's father. I left the building quite upset with adoption papers. … Those four words that were told to me over and over again "if you love him" you will give him up. Not one person ever said "if you love him" you will keep him.[881] [1981]

6.43 Mothers were also told that they would be able to leave KEMH, Ngala or Hillcrest once they had signed consent paperwork.[882]

> At the end of two weeks, I was told I had to sign some papers and then I would be allowed to go home. I was still very weak and dazed, and remember being frightened that I would fall over, and I desperately wanted to go home. I knew I had a baby, but I didn't know where she was. I signed the adoption papers and my mother drove me home. I don't recall thinking about anything. All I know is that I felt rather stupefied and so very tired.[883] [1968]

Not signing did not feel like an option

6.44 Despite desperately wanting their babies, mothers were not presented with options to keep them. When they were asked to sign their consent to adoption they did not feel that they had the choice *not* to do so. For example:

> I was taken by my mother to sign the adoption papers a few weeks later. I had no choice but to sign, as I believed she was with a family who were able to give her a better life than I could. I had no financial support and was still totally dependent on my parents for everything.[884] [1968]

> At that stage, I had still been not wanting to sign the papers but then they said she had already gone so I felt it was like a *fait accompli*. I felt helpless and hopeless. In later years, I learnt it was a lie and my baby had not even left the hospital – and when she did, she was taken to Ngala and was there for some weeks before being

879 Submission 7.

880 Submission 59.

881 Submission 70.

882 For example: Private individual 15, transcript of evidence.

883 Submission 50.

884 Submission 43.

> placed with adoptive parents … I was never actually given an option to keep her – no advice was ever given regarding social security support or any kind of support actually.[885] [1975]

6.45 The adopted person who received a letter from his post-partum mother after her death described 'the guilt and pain she carries over a 'decision' she made as a frightened, cornered, vulnerable teenager who had no one to turn to – and no other options'. The letter reads:

> My dear son yesterday the 12th/5/72 I gave you away so please please forgive me for that seemed to me to be the only human thing to do. But with every breath that I take I will pray that you are being loved and cared for. But there will always be someone who loves you deeply and is constantly thinking of you.[886] [1972]

Consent was obtained from mothers against their will and by improper means

6.46 It is clear in the evidence that the practices used to obtain signed consent from mothers were wrong.

6.47 Some mothers were clearly reluctant to sign at the moment of doing so:

> I was coerced into signing papers (shaming, no rights, we were unfit parents because we didn't have any money) … Where was my opinion when I signed the papers? And that's how I remained for a lot of my life. I had no voice!![887] [1964]

> The signing of the adoption papers, came next with dad and the lawyer present. I did not want to sign them I think I may have needed coercing as I do not remember much about that. Once it was done everyone left.[888] [1970]

> I had to go to the court to sign the papers for the adoption at the courts. I hesitated & the man waiting for my form told me to hurry up & sign the paper. I was embarrassed at the way he spoke to me & I was very upset signing the papers, I left crying & hurt.[889] [1971]

6.48 Some mothers were made to sign adoption papers against their will by their own family members:

> I then went home to my mother and stepfather. I told them I had a son and I wanted to keep him. All hell broke loose! Think of the neighbours! My pompous self-righteous stepfather – who had driven me from my home through his actions – took me, sobbing, into Perth to a solicitor's office. There I was made to sign papers. Walking down the streets of Perth to go home, held tightly by my stepfather, I was blinded by my tears and huge sobs. After all those months of trauma, of pain, of loss, it was all taken away from me. What should I have do? Was I gutless to be so manipulated? Was I just a weak, spineless person?[890] [1957]

Fathers were also coerced into signing consent to adoption

6.49 The inquiry evidence also contains examples of fathers being forced to sign adoption consent, being threatened with prosecution, and not provided any legal advice.

885 Submission 1.

886 Submission 112.

887 Submission 20.

888 Submission 82.

889 Submission 116a.

890 Submission 60.

> He was dragged into court by welfare and made to sign a consent to adoption – a requirement as he was paying maintenance. Prosecution for carnal knowledge was threatened if he did not sign.[891] [1968]
>
> Parents wanted to keep me so much but they threatened to have dad charged with cardinal knowledge as dad was 17 and mum was 15, 16 when had me[892] [1969]
>
> I was sidelined by the fact that I was not married, not included, and hindered, in the decision-making of the Adoption of my son. I was never advised of my rights, even when the presentation of paperwork was presented to me and instructed to sign after the birth of my son. I was left powerless, demoralized, and empty. [893] [1968]

FINDING 10

Practices used to obtain consent to adoption from mothers were coercive.

Fitness to sign consent

Some mothers signed within a week of giving birth

6.50 As considered by Chapter 2, in 1970, amendments came into effect which prescribed that a mother could not give her consent to adoption within 7 days of giving birth. The intention behind this was that it would safeguard mothers and allow her to 'return to a normal state of mind' following the birth. The obvious implication was that mothers were unlikely to be in a normal state of mind, or fit to give consent, within 7 days of birth.

6.51 Although those amendments were passed by the WA Parliament in 1964, they did not come into effect until 1970. During the intervening years, the practice of obtaining consent from mothers within 7 days of birth continued.

6.52 The inquiry evidence contains instances of women being given papers and signing consent to adoption in the following timeframes:

- A few days after birth[894] [1967, St Anne's]
- 2 days after birth[895] [1970, St Anne's]
- 3 days after birth[896] [1973, St Anne's]
- 4 days after birth[897] [1966, Ngala and 1970, St Anne's]
- 6 days after birth[898] [1966, Hillcrest]
- 7 days after birth[899] [1968, Devonleigh]

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891 Submission 59.

892 Submission 149.

893 Submission 88. Some fathers objected to their child's adoption but were overridden: see, for example, Submission 57 [1968].

894 Submission 52.

895 Submission 151.

896 Submission 6.

897 Submission 108; Submission 97.

898 Submission 58a.

899 Submission 59.

6.53 One of the mothers who signed early said she neither recalled signing, nor seeing a doctor who deemed her fit to sign at that point in time:

> I was shocked to see my signature there along side of my fathers dated 14/9 yet after giving birth in 1973 I'm positive my Father Nor I were EVER in each other presence over signing any papers. I didn't see any family members after giving birth until my Dad came alone to Perth to take me back home when I was discharged (we were from the country). I asked sister [Name] (Nun) on the phone "how did my signature get on that form I demanded to know"? her reply was a doctor assessed you after giving birth and he said you were fit to sign . I replied "I never even saw a doctor after giving birth. [900] [1973, St Anne's]

Mothers were not fit to sign consent

6.54 Many mothers were broken down by forced adoption practices by the time they came to provide consent to adoption. Some mothers who spent time in lying-in homes described that they had given up before they went into labour.

> By the time we went up to have our babies, we knew that was it. There was just no way.[901] [1970, Hillcrest]

6.55 Others described their severely negative emotional states from their treatment before, during and after birth, including being destroyed, downtrodden, distressed, confused, and disassociating.

> I was feeling totally isolated and strange as though I was in another world[902] [1957]

> There was no care. I was not cared about. I was just an unmarried mother. We had a stigma that was part of our psyche. We were not treated the same as normal people—normal human beings.[903] [1966, KEMH]

> I felt violated after being drugged and physically assaulted.[904] [1968]

> They succeeded in destroying me at that moment and I will never fully recover. ... within a couple of days my mother took me by bus to the city to sign some papers. I was very unwell, bleeding heavily, feeling faint and numb all over. … Did I ask to sign adoption papers?[905] [1968]

> But my dad convinced me. I had given birth so I probably had postnatal blues. Look, I know I was in a confused state of mind. So, off I trudged to the Supreme Court, little old [witness's Name], and I signed the papers, like my dad asked. He rang me that night. He inevitably got the papers and did his bit.[906] [1970]

> [After birth] I was truly alone and powerless to do anything about it and anger manifested later when I discovered I had been cheated and lied to. … Two days after discharge I write in my diary "Felt a bit depressed today – I still feel so confused". … I remember feeling dead inside. How do you conjure up that dead feeling? Dutiful as I had been when I was growing up, I went back into autopilot to stop myself from falling over. My head was so over-clouded with mental noise and

900 Submission 6.

901 Private individual 15, transcript of evidence.

902 Submission 81.

903 Private individual 9, transcript of evidence.

904 Submission 115.

905 Submission 59.

906 Private individual 16, transcript of evidence.

> emotions that day [I signed consent] I did what others asked of me without question in order to survive. I couldn't mentally process anything but with every fibre in my body I knew what I was doing was wrong. … I was not in a fit state to consent: I was a traumatized young woman barely out of her teens on tranquillizers[907] [1973]

6.56 Mothers also recall that when signing they were still physically affected by birth:

> Two days after delivery, a solicitor, Sister [Name] and 2 men came to my bedside at 8.00am and asked me to sign papers. I had been haemorrhaging during the night and felt weak on waking up. They told me I could apply for my baby within 30 days ... I was weak and intimidated by their presence. I thought I would have him within 30 days. I was forced to sign the papers on Day 2[908] [1970, St Anne's]

> Fully recovering from pregnancy and childbirth can take months not weeks and over this time your hormones fluctuate and so do your emotions and moods. I was on autopilot going through the motions. … I was emotionally exhausted, as my diary entries show, and physically exhausted from a long labour and complications. My diary and welfare and hospital files confirm in writing I was struggling mentally with the adoption decision and the effect this was having on my physical and mental health before and after the birth. Those responsible for my welfare should have assessed that I was in no fit state to sign legal documents, and I would argue the Office of Community Welfare in neglecting to do so violated their duty of care.[909] [1973]

6.57 Some mothers described giving birth and having their babies taken as abuse that rendered them incapable of consenting. For example:

> Our babies were torn from our wombs … I believe that it is **indefensible** for people to tear a mother and baby apart at the moment of birth and tell that mother – —the baby's gone! or —it's not your baby and —forget about the baby, go home and get on with your life!. She knows within her whole instinctual being, that her frightened baby screams for her **and her alone**. She too, silently screams in agony, for she is rendered **powerless** to answer her baby's cry. I believe it is **indefensible** to try to switch off and override a mother's mind, her instincts and her ability to feed her baby by administering powerful and dangerous drugs or cruelly binding her breasts before she gives an informed consent for the adoption of her baby. … I believe it is **indefensible** to then pressure her to sign away her child forever, *in a state of sheer terror and subjugation* and not inform her of her rights and entitlements.[910] [1968, Devonleigh]

6.58 Still other mothers were under the influence of the medications they'd been administered, were unaware they were signing consent, or were otherwise clearly not right.[911] For example:

> The social worker I was taken to see that day, was so concerned about my health, that she ordered a taxi to take me and my mother to the Supreme Court. I should not have even been there, I was too unwell and deeply traumatized to be fit to give legal consent. So who was looking out for my legal rights that day and who

907 Submission 124a.

908 Submission 151.

909 Submission 124a.

910 Submission 59 (bolds in original; italics added).

911 For example: Submission 72; Submission 48.

> was looking out for my legal rights in the hospital when they took my baby at birth, denying me access by lying and drugging me into oblivion?[912] [1968]
>
> My brother and I went to a prearranged appointment at intimidating legal offices to sign the adoption papers. The suited gentleman behind the desk refused to accept my signature as he said it would be, "unacceptable" as I was "too emotional and clearly doing this under duress." So not acceptable!! Stupefied we went home … At the second appointment, I reluctantly and under duress, signed the papers. At that time, I was doing it to protect my brother from further suffering.[913] [1968]
>
> my biological [mother] was drugged on Valium and taken to Hensman Road clinic [Kensington House] and told she was signing "naming papers". This was not the case she unknowingly signed adoption papers. When she was discharged, she asked where her baby was, and was told she had given her baby away.[914] [1970, KEMH]

6.59 Some mothers should not have been asked to sign consent in the states they were in shortly after birth. The Committee has come to the view that some mothers were targeted for ill-treatment in order to obtain their children for adoption, and that is why they were given paperwork to sign consent when not fit to do so.

Underage mothers signed consent without a legal guardian

6.60 It is questionable whether some mothers were fit to consent to the adoption of their children due to their young age at the time.

6.61 As noted in Table 2 last century the age of majority was 21 until it was changed to 18 in 1972.

6.62 The issue of obtaining consent from a mother who was still a minor was recognised to some extent by the procedural rules made to govern adoption applications. As noted in Chapter 3, in 1970 the Adoption of Children Rules provided that where a person (including a mother) giving consent was under the age of 21, a 'supporting affidavit' would be required. This affidavit needed to be from their parent, guardian or near relative. Among other things, this 'supporting affidavit' needed to set out:

- whether or not the person making the affidavit understood the effect of an order of adoption
- whether the effect of an order of adoption had been explained to the person giving consent, and whether that person appeared to understand it.

6.63 If the affidavit could not be obtained from a parent, guardian or competent person, it could be substituted by an affidavit by a 'reasonable and competent' person after interviewing the person who gave the consent.

6.64 The provisions regarding supporting affidavits for those under the age of 21 were clearly made to ensure that consent was not taken from young people who did not understand.

6.65 Despite the legal framework indicating that there was an awareness of age and its impact on consent, evidence contained many instances of women who would be considered minors but signed consent without appropriate supports. One mother submitted that 'most mothers

912 Submission 59.

913 Submission 37.

914 Submission 13a.

were minors and deemed children themselves under law'.[915] Fathers also signed adoption papers when underage.[916]

6.66 The gravity of consenting to adoption, alone, at a young age was put into contest by one mother like this:

> We were both legally minors - underage, still children in the eyes of the law. [The father] was a very mature sixteen and a half and I had my seventeenth birthday in the home one month before our baby's birth. At that age we could not take out hire-purchase unless a responsible adult co-signed; drink liquor in a hotel; buy or drive a car; hold a driving licence! Yet we could do this: sign the life of another human being away, change their name and send to live with another family! My signature had not one adult member, or adult representative of my family, in attendance witnessing or co-signing my signature! … I cannot comprehend just how this was ever allowed[917] [1957]

6.67 Some mothers believed that, because they were young, they had no say in their child being adopted. One 17-year-old woman was told:

> I had been lied too and deliberately deceived. One example being that as a minor "I had no rights" . I was told this in the home I'd been incarcerated in (last few months of my pregnancy) after I had verbally stated to a nun about 2 weeks before giving birth " that I don't want by baby adopted out " the nuns reply was " how can you be so selfish ". I had no legal representative back then nor "offered any. I believed this Nun (thinking back Then Nuns don't lie).[918] [1973, St Anne's]

6.68 A 15-year-old mother described:

> In all this time, no-one had ever told me that I had any rights. I had been lied to consistently. I did not know anything of my daughter's life, existence, or anything at all.[919] [1966]

6.69 Conversely, many mothers were above the age of 21 prior to 1972, and older than 18 in the years after 1972. One stated: 'I was 23 years old, of voting age, and treated as if I had no rights.'[920]

6.70 Correctly, some mothers were told that, whatever their age, adoption was entirely up to them.

> The reality was that after giving birth age was inconsequential … Her rights at 14 were the same as if she were 34, because the act of giving birth entitled her to the full legal control and custody of her child[921]

6.71 However, in one example in evidence, 2 government social workers especially emphasised this to the 15-year-old mother during her pregnancy *because* her parents were supportive of her keeping her child and willing to help her raise it (see paragraph 4.123). Significantly, her parents were not present at these meetings.

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915 Submission 59. See also: WA Government information on illegitimacy 1972, in Appendix 6.

916 For example: Submission 47.

917 Submission 81.

918 Submission 6.

919 Submission 108.

920 Submission 37.

921 Submission 72.

6.72 This mother, and others, recounted that their own parents were not present when it came to them signing consent:

> I was residing at Ngala … I was handed the paperwork for adoption at the centre by one of the staff and asked to sign … I didn't have anyone with me other than the staff member.[922] … some adult came and said "Do you want to come and sign these papers?" … They did say they were adoption papers, so I signed them with her. … I was 15 that year. … My parents were not there. There was nobody else there.[923] [1971]

> 6 days after having my son an appointment was set up for me to come up to the Department in West Perth to officially sign the adoption papers. I went with my boyfriend once again without a legal guardian. No one in that office asked where my legal guardian was. … I was 15 years old and was made to make a big decision that I should never had made.[924] [1981]

6.73 Dr Cole observed that 'adoption legislation was written so minors were able to enter into a contract'.[925] Adoption paperwork reflects that, despite some mothers' tender years, they were treated as being capable of fully comprehending what consenting to adoption entailed under the law. This is explored in the following example. Issues were also seen in the way in which the rules from 1970, requiring supporting affidavits, were complied with. There was no provision requiring a substitute 'supporting affidavit' to come from an independent source. The evidence indicates that such affidavits were provided by officers from the Department. It was inappropriate for officers from the Department to be given the ability to provide this affidavit, given the officers had vested interests in the adoption succeeding.

6.74 In the most prominent example of a substitute 'supporting affidavit', an officer from the Department claimed:

> THAT on the [date] at Perth in the said State I fully explained the effect of an Order of Adoption to the said [MOTHER'S NAME] before she completed her documents in connection with the said adoption and I consider that the said [MOTHER'S NAME] understood the effect of an Order of Adoption when her affidavit was sworn.[926] [1965]

6.75 However, in her submission, the mother refutes the information provided:

> When my baby was twelve days old, I went to the adoptions department in the city and saw a woman named [Name] and requested to have my baby given to me. She refused, saying "nonsense your baby has been placed" (decades later I discovered she was still in the KEMH). Ms. [Name] then, after knowing me for about 10 minutes took me across the road to the court house where papers were given to the witness, (a court official) and I signed. I was distressed, nothing was read to me, and a copy was never given to me. There was no support of legal person for me despite being a minor.[927] [1965]

6.76 This affidavit is considered further in Chapter 7 when reviewing the role of the Department and its officers.

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922 Submission 74.

923 Private individual 27, transcript of evidence.

924 Submission 70.

925 Submission 72.

926 Private individual 22, tabled paper 1.

927 Submission 73.

6.77 By contrast, one of the examples referred to above and detailed in paragraph 4.131 shows that not only were mothers brainwashed and bullied into adoption, their parents were too. In this case:

- the 15-year-old mother's parents were supportive of her pregnancy
- they wanted to help her raise the baby
- they questioned how their daughter, as a minor, could decide on adoption against their wishes.

6.78 Despite this, when the maternal grandmother was presented with a pre-typed supporting affidavit containing personal details about her daughter that had been gathered at the daughter's very first interview, she signed. The text of that affidavit says:

> I understand the effect of an Order of Adoption which I have explained to my said daughter and I consider that my said daughter fully understands that such Order shall permanently deprive her of all parental rights. … I approve of the making of an Order of Adoption for the said child[928]

6.79 The mother explained:

> The Department and KEMH used my parents working class background, them having very little knowledge of the legal system and not to challenge authority. They kept my parents and I separated when interviewing and told both of us if the baby was kept how many lives would be ruined. All these years I thought the reason why my parents and I did not speak was because they were ashamed of me for getting pregnant and then placing my son up for about adoption. The reality was they did not want to upset me and had felt that they had let me down.[929]

6.80 Other mothers also reported that their parents were 'encouraged … to authorise removal of children'[930] and provided examples of their parents signing affidavits supporting the adoption.[931] One mother reflected that she was told the decision lay with her father:

> I asked my Father years later when he was in the early stages Of Alzheimer's "why didn't you go and check on My Baby when I asked you too this was the day he came and took me Home after I'd given birth . Note I had Asked 3 times (on 3 different days) before asking him and every time I was denied access … My Dads response was " I couldn't do it " it would have broken My heart ". End quote Certainly to me doesn't sound like a Opa (grandfather) That supposedly willingly gave up His first born grandchild does It? Told … it was up To my Dad to decide my fate and that of my Beloved much wanted newborn daughter. … The result of that lie "Being " I resented my Father for years". I now understand my parents were lied to and deceived too.[932] [1973]

6.81 These cases illustrate that, on the one hand, minors were not thought to be capable of making an independent decision about having their children adopted; but, on the other hand, it was fine for them to do so. The reality seems to be that those facilitating adoption employed different strategies for different situations.

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928 Private individual 7, tabled paper 1.

929 Submission 70.

930 Submission 80.

931 For example: Submission 1; Submission 109; Private individual 15, transcript of evidence; Private individual 16, transcript of evidence.

932 Submission 6.

6.82 There were also underage mothers in evidence who were forced into adopting their children by their own parents. In these cases it is assumed that those parents willingly provided supporting affidavits. It is likely that those supporting affidavits did not provide the safeguard for young people that was intended when they were made into a requirement under adoption legislation.

FINDING 11

Many mothers were made to sign consent to adoption when they were not fit to do so.

Whether consent was informed

Crucial information continued to be withheld from mothers

6.83 Chapter 4 discussed how staff facilitating adoptions did not give mothers highly relevant information that may have dissuaded them from adopting. Staff also intentionally misinformed mothers.

6.84 Mothers who did not have the information they needed before birth were not given it after birth. Neither were many given an explanation of the adoption process they were then already in and vital aspects of their legal rights in relation to it, including their right to revoke their consent once signed. (Revocation is discussed further, below.)

> She was asked to sign papers and name me, she remembers thinking "I'm allowed to name my baby". This was a big shock as she was given no information about the adoption process.[933] [1967, KEMH]

> I do tell you that it is, and it was, a private adoption. I was unaware of how that would have proceeded.[934] [1968]

> As adoption is a legal process, the difficult social environment at that time … should not have influenced the non provision of informed consent by a government department charged in taking legal consent. Information stating that consent could be revoked up until the final adoption order was granted and how to go about that process - is a vital part of that legal process. I would think that informing mothers of the benefits available would be vital in terms of choice.[935] [1968]

6.85 A mother who wanted to keep her child but left the child in Ngala while sorting out her affairs, was misinformed about her rights at that point:

> After a few weeks she had convinced her father to allow her to keep me, at which time she returned to Ngala and was told in no uncertain terms, she could not take me, and she would need to apply through the courts to get me back and to prove she would be a fit mother. This was too much for [mother's name] to deal with and she was bullied, shamed, and coerced into signing the adoption papers.[936]

933 Submission 67.

934 Private individual 24, transcript of evidence.

935 Private submission.

936 Submission 111.

6.86 Some mothers were not given any information about what adoption might be like for their child. When one mother wanted to know about the welfare of her son and the people who were adopting him, she was told no information could be divulged.[937]

6.87 However, many mothers were misled about who would be adopting their children and the kind of lives they would then have. Lies told to mothers to facilitate their consent included that the adoptive parents:

- were a married couple
- had no children of their own
- were unable to have children of their own
- were able to provide a better upbringing for their child than they could
- would provide such a good life for their child that adoption was in the interests of the child's welfare.

6.88 However, in many cases the person (or people) who ended up adopting their child was not what mothers had been told (see discussion from paragraph 6.151, below). Further, many adopted children had difficult and negative childhoods in their adoptive families, including abuse. This is examined in Chapter 9.

Mothers thought their babies were already placed for adoption

6.89 As discussed in paragraph 5.89, although it was not the case, and although they had not yet signed consent to adoption, after their babies disappeared mothers were told that they had gone to their adopters.[938] They were not told that their children were left in hospital, transported to other institutions, or put into foster care. Department records show that temporary foster care became a standard practice from 1970 to 1971, and was routinely used during the 30-day revocation period in 1978.[939] Mothers in evidence were not told that such arrangements would be made for their babies.

6.90 For mothers, because they were led to believe their children were given to prospective adoptive parents soon after birth, signing consent to adoption was merely formalising something beyond their control that had already taken effect. Mothers expressed this repeatedly in their own words, including as follows:

> The [Department] employee who decided that I should be taken from my mother, who coerced and tricked my mother into signing a consent to adoption, was named [Name], a name my mother never forgot. [Name] and the hospital staff lied to my mother, telling her I had already been placed with a family. This was not true, as the records show I was still in hospital at that time.[940] [1965]

> I was told that the adoptive parents were going to take her away the day that I left. I remember looking out the car window, thinking, "I wonder if they are there. I wonder if they are there."[941] [1970, Hillcrest]

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937 Submission 7. Some submitters, however, stated that adoptive parents received the mother's personal information (see: Submission 20; Submission 80; Submission 124a).

938 For example: Submission 1; Submission 43; Submission 59; Submission 108; Submission 148; Private individual 15, transcript of evidence; Private individual 23, transcript of evidence.

939 Child Welfare Department, *Annual Report 1970–71* (see relevant extract in Appendix 5); Department for Community Welfare, *Adoption Information and Procedures* (1978), p 6, attached to Department of Communities, email, 7 June 2024.

940 Submission 46. See also: Submission 70.

941 Private individual 15, transcript of evidence.

> I went there [to the nursery in KEMH] and she was gone – and that is when they gave me the talk.. about how she had gone to a good home, how I mustn't be selfish, how heartbroken the parents would be if I changed my mind, and so on. For years it puzzled me how they could take her like that when I hadn't signed any papers. I kept thinking .. maybe they got me to sign something at Ngala without saying what it was? … did I sign something when I was still recovering from anaesthesia? I couldn't work it out. Listening to the other women's submissions about signing forms in the hospital after giving birth really made me wonder … why can't I remember signing a form? I could only remember signing the papers in West Perth, when my mother took me in. And I thought all along that was the final papers – once signed, that was it.. I could not change my mind. So I signed because, as far as I knew, my baby had already gone to her new family.[942] [1975, KEMH]

6.91 One mother considers that not understanding where her child was – and would remain for quite some time after her consent – had serious implications for the validity of that consent:

> the consent was fraudulently obtained in that by omission I was never fully informed of the true nature of my daughter's care arrangement up until signing the consent or after during the month-long revocation period. I understood in signing the consent that my daughter had already been placed with a family, as I had been told by the social worker at KEMH … As my diary entries and hospital records show I was already in two minds about the adoption before and after her birth, and I would NEVER have consented to her being made a ward of state and in care at Ngala for 51 days. Community and Child Welfare had a legal and moral responsibility to provide us both with reasonable care up until the period of revocation lapsed and beyond. They were negligent in their duty of care for failing to provide me as her primary carer with information regarding her care arrangement that would have enabled me to intervene and set in motion the revocation process in a timely manner.[943] [1973]

6.92 Conversely, an adopted person explained that her mother believed she was in Ngala waiting her to collect when she was in fact already placed with adopters.

> Once I was born, [Name] desperately wanted to keep me, but she needed time to gain the approval of her father. [Name] was led to believe she had up to six weeks to make her decision and sort out her affairs whilst I was "safe" at Ngala. After a few weeks she had convinced her father to allow her to keep me, at which time she returned to Ngala and was told in no uncertain terms, she could not take me, and she would need to apply through the courts to get me back and to prove she would be a fit mother. This was too much for [Name] to deal with and she was bullied, shamed, and coerced into signing the adoption papers. Unbeknownst to her at that time I had already been adopted at two weeks of age. How did this happen? She had not signed any documents at that time, nor had she given her consent. It would take sixteen years for her to find out the truth. No wonder she had so much pressure placed upon her as I had already been STOLEN and they needed to cover this up. I cannot begin to understand her pain at being denied her own flesh and blood.[944] [1971]

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942 Submission 1b.

943 Submission 124a.

944 Submission 111.

6.93 In a further case in evidence from 1968, the child was placed with adoptive parents within a week of birth, prior to the parent's signing any consent.[945]

No legal advice or independent advocacy was provided to mothers

6.94 Regardless of their age, the Committee was troubled by the Department deeming many mothers as sufficiently informed about adoption simply because an officer stated as much. In a lot of cases, the only information mothers had about adoption was that told to them by public servants or institutional staff involved in facilitating adoption. As explored earlier in this chapter, and in Chapter 4, much relevant information was withheld from mothers by these same actors during the adoption process.

6.95 Some women confirmed that they had no legal input when it came to providing their consents to adoption:

> I thought I didn't have any rights.[946] [1964]

> Hon TJORN SIBMA: Was there anybody acting on your behalf, I suppose, in a legal sense or in a supervisory sense? I get the picture from what you have told me that you are a very young woman, you have got this solicitor, you are in Hillcrest and they are saying, "These are the documents you have to sign." Was anyone there sort of advising you or giving you advice?
>
> WITNESS: No, not at all. No, no.[947] [1970]

> My last scheduled appointment was at the Department for Community Welfare Adoptions Office five days after I was discharged from the hospital to sign the Adoption Consent. The purpose of this meeting was to ensure that I understood the meaning and also the finality and irrevocability of what I was about to sign. I was alone with no moral support or legal representation to advocate for me. … I was too confused, unwell and exhausted to fight and I gave up. I signed and dated the document and my daughter's life away to strangers … After signing the document at the office of Community Welfare I was escorted immediately to the Supreme Court to submit the adoption documents and sign the affidavit.[948] [1973]

6.96 Some private solicitors visited mothers to seek their consent:

> I don't know how long I was in the Hospital. Once at home, I can say that a Lawyer turned up, whilst I was in bad shape and in bed. He placed paperwork on my blanket and I signed….part of me couldn't believe that this was all it took! Surely there was more to it than that?! I had no idea!! No discussion about a change of mind.[949] [1968]

6.97 Solicitors also visited mothers in hospital. For example, one came to the bedside of a mother in St Anne's in 1970.[950]

6.98 Some women whose consents to private adoptions were sought by lawyers were misinformed. For example, one mother remembered being taken to a private solicitor to sign adoption paperwork after giving birth at St Anne's:

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945 Submission 109.

946 Submission 20.

947 Private individual 15, transcript of evidence.

948 Submission 124a.

949 Submission 109.

950 Submission 82.

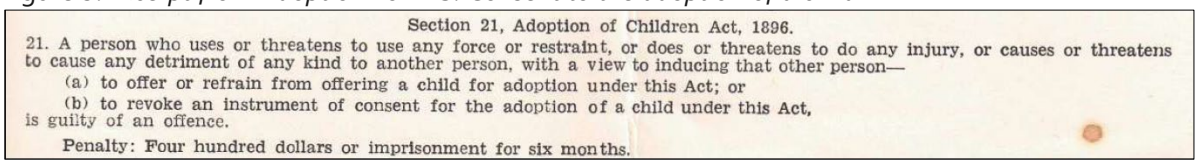
> The lawyer told me I was never to try to contact her, I had no rights to do so. I should go away and pretend that I had never had a child, tell no one, never speak of it ever. This was an impossible task, but I managed to keep my silence until my daughter contacted me nearly 20 years ago.[951] [1968]

6.99 Similarly, another mother attended an appointment with a Justice of the Peace in West Perth that had been arranged for her by the Department. Alone, she described being intimidated:

> As soon as I got to the desk the man (JP) got the forms and began saying directly to me how I would go to gaol if I ever talked about adoption or if anyone did anything to make the adoption not go ahead they would go to gaol AND THAT INCLUDES YOU. He then traced his finger along the bottom of the page and repeated with a lot of emphasis on how I would go to gaol.[952]

6.100 The mother submitted that the text in the footer of the form that the JP was pointing at was a section of the Adoption of Children Act actually designed to protect her. That part of the form is reproduced at Figure 9, and the text is reproduced in the footnote below.

Figure 9. *Excerpt from Adoption Form 3: Consent to the adoption of a child*



Section 21, Adoption of Children Act, 1896.

21. A person who uses or threatens to use any force or restraint, or does or threatens to do any injury, or causes or threatens to cause any detriment of any kind to another person, with a view to inducing that other person—

(a) to offer or refrain from offering a child for adoption under this Act; or

(b) to revoke an instrument of consent for the adoption of a child under this Act,

is guilty of an offence.

Penalty: Four hundred dollars or imprisonment for six months.

[Source: Submission 98[953]]

6.101 Some parents were sent to private solicitors who did not advise them:

> [Boyfriend/child's father] and I met on the steps of the G.P.O. in Forrest Place and walked together to the solicitor's office ([Business Name], in Howard Street … and, with the stroke of a pen, 'consigned' a tiny human being to a life with strangers, as though we were sending a parcel through the mail. Easier in fact, we didn't have to pay a penny for the transaction! I just had to face some blank faced men who handed me a pen and a piece of paper and told me where to sign. No explanations afterward or if there were I cannot remember. I was numb and in disbelief. [Boyfriend/child's father] was upset and trying to comfort me as I felt so ill and it felt as though my stomach was falling out from between my legs, my stitches were itchy and painful, my breasts were leaking through my summer frock[954] [1957]

6.102 Another mother interacted with a lawyer who was hired by the adopters:

> When it came to signing the papers—I do not have a lot of memory—the people who delivered them, the matron, the friends of the matron who were going to

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951 Submission 43.

952 Submission 98.

953 The text reads:
'Section 21, Adoption of Children Act, 1896.
21. A person who uses or threatens to use any force or restraint, or does or threatens to do any injury, or causes or threatens to cause any detriment of any kind to another person, with a view to inducing that other person—
(a) to offer or refrain from offering a child for adoption under this Act; or
(b) to revoke an instrument of consent for the adoption of a child under this Act,
is guilty of an offence.
Penalty: Four hundred dollars or imprisonment for six months.'

954 Submission 81. See also: Submission 109.

> adopt my daughter, they paid for the solicitor. They were quite well off, so they paid for a private solicitor to come to the home so I could sign.[955] [1970]

6.103 Yet another mother interacted with a lawyer organised by the Department with a Department officer present:

> I remember going into a room, a long board table, been scared, alone, ashamed, two man were present, one was mr [name], one I think was a lawyer, I remember him saying I had to pay a fee, I didn't know this, mr [name] said its ok, he would pay, no one told me how to think this through, Im vomiting while writing this[956] [1981]

6.104 As considered in the next chapter, most unmarried mothers were not in a position to afford or pursue their own legal advice. There was no provision in the process requiring them to obtain legal advice, and this was never suggested or offered to them within the evidence before the inquiry.

What did mothers sign?

6.105 The precise forms mothers were required to sign for an adoption application to succeed varied over the course of the 20th century. They often included a 'consent to adoption' form and an affidavit. The consent and wording of the consent to adoption form was available from the court from at least 1930 onwards. However, the additional affidavit by mothers did not have a prescribed form. Instead, it could be prepared with different wording or contents for each case, so long as it included the required information.[957]

6.106 One mother described that she was not required to prove her identity when signing and submitting adoption paperwork:

> The receiving clerk required no formal identification, and I did not have a birth certificate in my adopted name anyway at that stage - I could have been anyone. You could blame it on past sloppy paper work but at the time there was sufficient rigour around identification for passports, rental agreements, etc. In other words, I had to provide less proof of identity to give my baby away than open a bank account.[958] [1973]

6.107 By the time they formally signed consent, most unmarried mothers had already been deprived of their rights. This was emphasised by the court's prescribed consent forms – see Figure 10.

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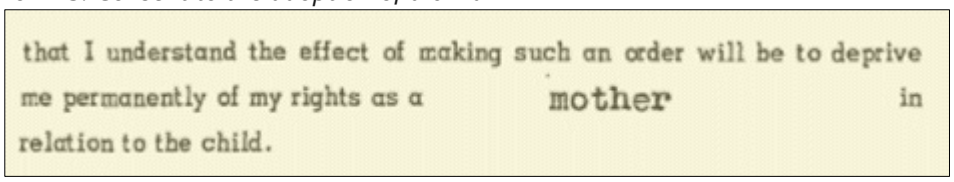
955 Private individual 15, transcript of evidence.

956 Submission 5.

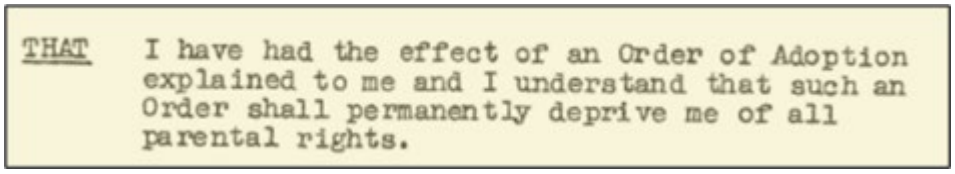
957 For example, in 1970 the Adoption of Children Rules required an affidavit by the mother of the child, deposing to the date and place of birth of the child, and the child's name and parentage; see Rule 13(1)(d).

958 Submission 124a.

Figure 10. *Extracts on parental rights ceasing from a 1971 declaration made to the Supreme Court on Form 3: Consent to the adoption of a child*



that I understand the effect of making such an order will be to deprive me permanently of my rights as a mother in relation to the child.



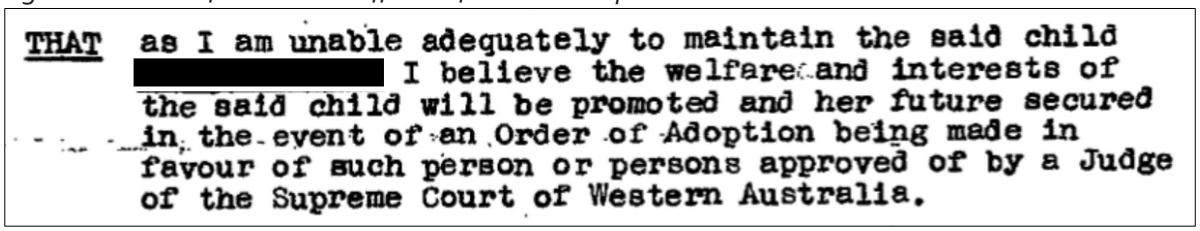
THAT I have had the effect of an Order of Adoption explained to me and I understand that such an Order shall permanently deprive me of all parental rights.

[Source: Private individual 27, answers on notice]

6.108 Mothers shared their affidavits with the Committee. These were significant because, as noted above, there was no standard or prescribed form from the court, so the contents and phrasing of the affidavits could vary. It appears that the affidavits were prepared in advance for mothers, and presented to them for signature. Similar, or the same, phrasing was seen across multiple affidavits, suggesting that the Department had a template.

6.109 The Committee noted with interest the below statement, which was included in the affidavits of some mothers:

Figure 11. *Extract from a 1965 affidavit filed in the Supreme Court*



THAT as I am unable adequately to maintain the said child [redacted] I believe the welfare and interests of the said child will be promoted and her future secured in the event of an Order of Adoption being made in favour of such person or persons approved of by a Judge of the Supreme Court of Western Australia.

[Source: Private individual 22, tabled paper 1]

6.110 It was significant that mothers were made to swear affidavits containing this statement. There was nothing at the time within the legal requirements for an adoption application that required the affidavit by the mother to state:

- they were not able to adequately maintain their child, or
- they believed the welfare and interests of the child would be promoted by the order of adoption.

6.111 Instead, it appears that this statement was included by the Department for their own benefit. By having the mother give sworn evidence of the above, it suggested the mother was in complete support of the adoption order being granted.

6.112 It also formed a barrier against a revocation of consent, or a later attempt to reverse the adoption. If a mother later tried to claim she was able to adequately maintain her child, or that she did not believe the welfare and interests of the child were promoted by the adoption, the immediate question posed to her would be why she had provided sworn evidence to the contrary.

6.113 This was a practice which significantly undermined the legal position of mothers, but was so subtle among the more overt practices that it went unnoticed by most.

Mothers did not know what they were signing

6.114 Contributors' evidence makes clear that some mothers:

- did not know that the papers before them were consent papers
- were told the consent papers were something else
- were unable to read the consent papers because they were distressed
- were prevented from reading the consent papers by those witnessing
- did not fully understand the situation or what they were signing
- were rushed and pushed into signing.

6.115 For example:

> [The affidavit] states that [Department officer] explained to my mother the effects of an adoption order, but my mother had no intention of having me adopted so why would she have explained the effects of an adoption order? Also, [Department officer] did not explain to my mother that she was still my legal parent at that time.[959] [1965]
>
> One day I was taken to an office in West Perth where I was to sign some papers (unknown to me were adoption papers).[960] [1969]
>
> The drive to the supreme court was a complete blur no matter how I tried I could not stop the tears flooding down my face, I was taken into a small side room where I was given a page to read and sign. (What was I signing I could not read let alone see) … A finger was pointed to where I should sign. My mother was hissing at me, "sign the bloody thing so we can get out of here, people are waiting for us." Can this really be legal?[961] [1969]
>
> Hon SHELLEY PAYNE: And did anyone ever explain to you about the paperwork or —
>
> [WITNESS]: No, not even the gentleman who witnessed it.[962] [1969]
>
> Told the consent forms were naming papers.[963] [1970, KEMH]
>
> On 14 April 1971, 14 days later, Mum took me into the city to sign the adoption papers. I remember standing at the front counter as the man pushed the adoption papers towards me. I became so distraught that I could not sign them. …Years later, Mum told me that we were in there for nearly an hour and it took several attempts of the man coming in and out before I could eventually sign it. No other options were given here either. … This is like it happened a second ago. I remember walking there with mum, the man coming over, giving my name and the man coming back and just pushing it over like, "You just need to … sign on the bottom line." … it was very quick. There were people around. There was a counter. I was there for a long time. He pushed it over and I could not sign it. I started getting distressed, getting really distressed because I could not sign it and then because I was so distressed him taking mum and I to a side room. And then I remember being there for a while, but I had a conversation with my mum before

959 Private individual 22, transcript of evidence.

960 Submission 47.

961 Submission 103; Private individual 5, transcript of evidence.

962 Private individual 5, transcript of evidence.

963 Submission 13a.

she passed away and she said, "Gee, [daughter's Name], we were there for nearly an hour and the man kept coming in and out for you to sign the form", but I could not move my pen on the paper. Like, I could not sign it. It took several attempts. … He took the forms away with him, waiting for me to calm down, and then came in again, "Try to write." I could not get my pen to move on the paper and I was getting distressed, and he would go out again and then come back in. I remember he kept putting them down and then taking them with him and then coming back in and going out, but I did not realise how many times until mum told me, because I had sort of blocked it out. But that is why I remembered.[964] [1971]

The Adoption Consent put in front of me had been pre-printed with my name and details collected from my previous meetings with the welfare officer fifteen days prior to my daughter's birth. The whole process was swift and impersonal and when asked did I understand what I was signing I said 'yes' - a better life for my daughter than I could give her as her mother - as I had been groomed to think in counselling sessions. … I did not fully understand the nature of the consent: I had no independent legal representation and was not fully informed of the care arrangement or my option to object. For example, I was not made aware that in signing the adoption consent that my baby was actually being taken into care and would become a ward of state until her adoption.[965] [1973]

Now, looking again with calmer eyes, I see the papers I signed on [date] with my mum in West Perth were the consent papers! So they took my baby away before I signed the papers. How could this happen? The adoption order went through on [date 28 days later], with me never knowing I still had time to change my mind.[966] [1975]

[The JP] then made me acknowledge I had understood by swearing on a bible - it was a dark burgundy one, put forms one on top of the other and pointed to where I had to sign.[967] [1979]

FINDING 12

Mothers who signed consent to adoption were not adequately informed or were misinformed.

Mothers who did not sign consent at the time

6.116 Some mothers questioned whether they ever signed. One provided examples of 3 entirely different signatures on her particulars, consent, and revocation form, only the last of which was filled independently.[968] Others are clear that they did not sign consent. A mother told her adopted child that:

> Her signature was forged. Her signature, which gave consent to giving me up for adoption, was not hers. … How was this allowed to happen?[969]

6.117 As discussed above, some mothers question the signatures on their consent documents as being their own, and 3 mothers never signed consent at all.

964 Private individual 23, transcript of evidence.

965 Submission 124a.

966 Submission 1b.

967 Submission 98.

968 Submission 98.

969 Submission 119. See also: paragraph 5.92.

6.118 The first was submitted by an adopted person and occurred in 1949, when his mother left him at the hospital because her father would not let her bring her newborn home. He was made a ward of the state and fostered out, seeing his mother periodically. The mother had not signed consent to adoption, but was required to attend court when the child was 7 because his foster carers wanted to adopt him.[970]

6.119 The Committee received evidence from both a mother and an adopted person relating to 1968. Part of the mother's evidence is reproduced as the first example in paragraph 5.34. The mother was a state ward, wanted her child, and had no recollection of giving birth. The adopted person submitted:

> To this day she never has signed the adoption papers consenting to giving me up. Instead some 16 months later the Dept. found her mother and got a signature from her, so that I could be legally adopted and renamed.[971]

6.120 As already described above, in 1972 one mother was threatened that her first daughter would be taken from her if she did not consent to the adoption of the second. This mother left her newborn at the hospital and did not sign consent to adoption. She then requested her newborn be fostered until she was financially able to care for her, and disappeared. Years later, the mother told her adopted daughter:

> I was absolutely terrified and just ran and ran, so sorry that happened but I thought I had no choice"... "too young to think it out rationally". I hope you can forgive me. I can't forgive myself".[972]

6.121 The mother 'admitted she was scared her older daughter would be taken away, as she had already bonded with her'.[973] Her daughter entered the foster care system, and was adopted 4 years later.

Revoking consent

6.122 As laid out in Chapter 3, before amendments to the Adoption of Children Act took effect in 1970, mothers who signed consent to adoption could technically revoke their consent up to the point an adoption order was made by the court. After 1970, mothers could revoke their consent within 30 days of signing, by writing to the Director of the Department. When further amendments took effect in 1972, other authorised officers of the Department could personally accept a revocation.

6.123 The concept of revocation was closely tied to the concept of consent to adoption. Whenever the matter of adoption arose in the Western Australian Parliament, Hansard revealed a clear understanding by law makers that adoptions were what the individual mothers involved wanted. The ability to reconsider (within a limited timeframe) was an important part of this.

6.124 Despite the legal framework providing for revocation of consent, the evidence indicated that actual practice did not facilitate this. Actual practice involved mothers not being made aware that they could revoke consent, not being informed of how to actually do so, or being dismissed when they attempted to revoke their consent.

970 Submission 143.

971 Submission 117.

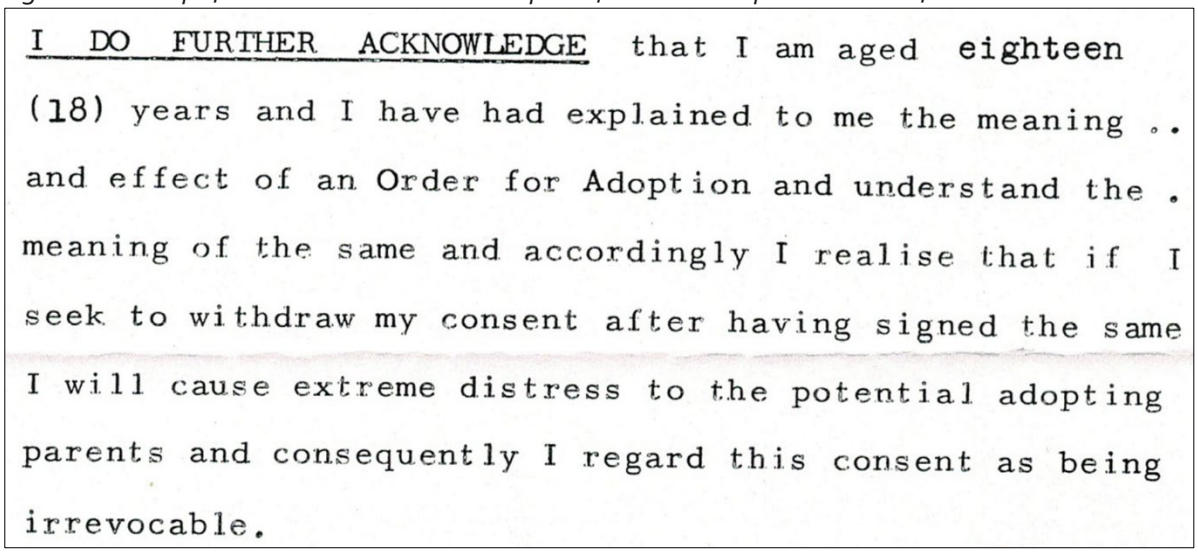
972 Submission 68.

973 Submission 68.

Early consent forms did not contain information about revoking consent

6.125 The Committee was provided with various samples of written consents for adoption. Among those prior to 1970, some samples make no mention of revoking consent at all.[974] Others were written in a way that pressured mothers not to change their mind and sought to close off the possibility of revocation altogether. These samples do not explain that mothers had a right to revoke their consent. An example from 1968 is at Figure 12.

Figure 12. *Excerpt from a 1968 consent to adoption filed in the Supreme Court of Western Australia*



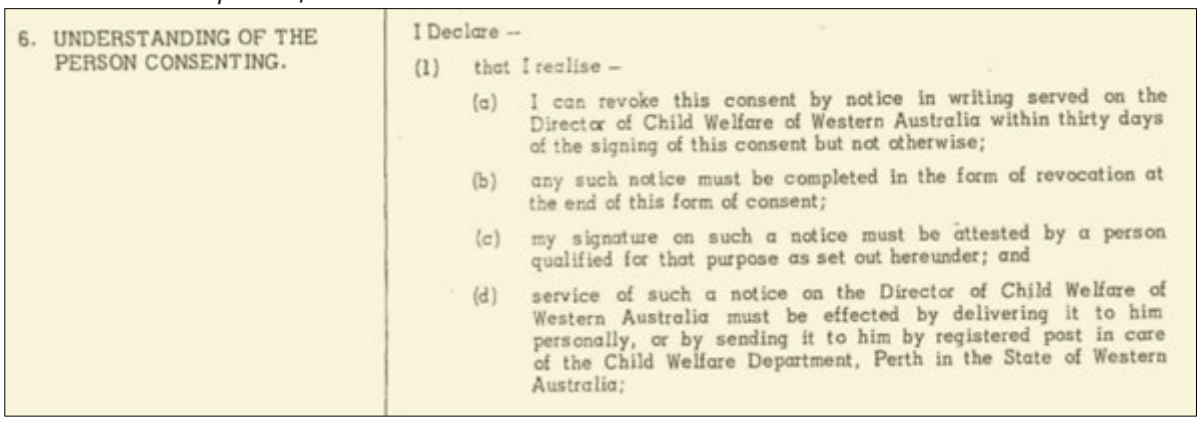
I DO FURTHER ACKNOWLEDGE that I am aged eighteen (18) years and I have had explained to me the meaning .. and effect of an Order for Adoption and understand the . meaning of the same and accordingly I realise that if I seek to withdraw my consent after having signed the same I will cause extreme distress to the potential adopting parents and consequently I regard this consent as being irrevocable.

[Source: Submission 144]

Consent forms after 1970 contained information about revoking consent, which was not always up to date

6.126 The Committee was also provided with copies of written consents from after 1970. After 1970, the 'prescribed' form contained specific information about revoking consent. An example is included at Figure 13.[975]

Figure 13. *Extract on revocation from a 1975 declaration made to the Supreme Court on Form 3: Consent to the adoption of a child*



6. UNDERSTANDING OF THE PERSON CONSENTING.	I Declare – (1) that I realise – (a) I can revoke this consent by notice in writing served on the Director of Child Welfare of Western Australia within thirty days of the signing of this consent but not otherwise; (b) any such notice must be completed in the form of revocation at the end of this form of consent; (c) my signature on such a notice must be attested by a person qualified for that purpose as set out hereunder; and (d) service of such a notice on the Director of Child Welfare of Western Australia must be effected by delivering it to him personally, or by sending it to him by registered post in care of the Child Welfare Department, Perth in the State of Western Australia;

[Source: Submission 1c]

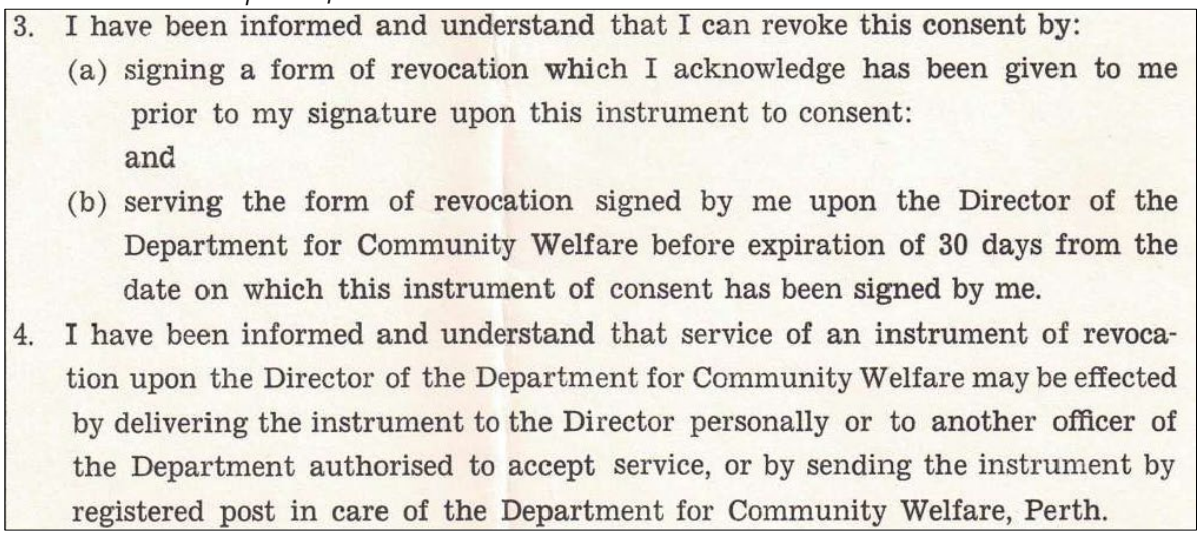
6.127 Amendments which took effect in 1972 provided for revocation to be served not just on the Director, but also on authorised officers. However, this is not reflected on the above form

974 For example: Submission 103 [1968]; Private individual 24, tabled paper 1 [1969].

975 See also: Private individual 27, answers on notice [1971].

from 1975. The form also does not reflect that the Child Welfare Department had become the Department of Community Welfare 3 years earlier. These errors had been corrected in the 1979 and 1981 versions provided to the inquiry – see Figure 14.

Figure 14. *Extract on revocation from a 1979 declaration made to the Family Court on Adoption Form 3: Consent to the adoption of a child*



3. I have been informed and understand that I can revoke this consent by:
   (a) signing a form of revocation which I acknowledge has been given to me prior to my signature upon this instrument to consent:
   and
   (b) serving the form of revocation signed by me upon the Director of the Department for Community Welfare before expiration of 30 days from the date on which this instrument of consent has been signed by me.
4. I have been informed and understand that service of an instrument of revocation upon the Director of the Department for Community Welfare may be effected by delivering the instrument to the Director personally or to another officer of the Department authorised to accept service, or by sending the instrument by registered post in care of the Department for Community Welfare, Perth.

[Source: Submission 98]

Mothers did not know they could revoke their consent

6.128 Although information about revocation was included in some consent paperwork, some mothers in evidence were not able to read what they were signing, and others did not understand what they were signing, as discussed from paragraph 6.114, above.

6.129 Many mothers in evidence said they did not know they were able to revoke their consent.[976]

> Not one person ever explained any of the options available to us to keep our child. I never knew until forty years later there was any assistance available to help us keep our baby. Nor were we told that after signing the consent papers we had thirty days to change our minds! Change our minds? We were still planning ways we could take our baby home and manage by ourselves, until the end.[977] [1957]

> I would say that if we had of been given any assistance at all or any advice or if we had of been told there was a pension available for single mothers, we might have all had a different outlook on what happened to us. We were denied any knowledge that we could get a pension as a single mother. We were not told that after the adoption, we were given so many months to rescind that decision. We were not told anything.[978] [1957, Hillcrest]

> The adoptive parents need not have worried about us revoking our consent. Mothers were not told they could revoke their consent. I have never met a mother who was told that they could revoke their consent up until the final adoption order was granted. Mothers were made to believe that once a consent was signed it was final.[979] [1968]

[976] For example: Submission 52; Submission 70; Private individual 20, transcript of evidence.

[977] Submission 81.

[978] Private individual 20, transcript of evidence.

[979] Submission 59.

> After the child is adopted there is a letter sent to the young mother in case she has changed her mind. Mine did arrived but Mum burnt it.[980] [1969]
>
> Hon TJORN SIBMA: Would it be fair for me to assume you did not have an appointed advocate who was looking after your interests in any way?
>
> [WITNESS]: No.
>
> Hon TJORN SIBMA: Therefore, it was probably never explained that there was a right to revoke the adoption?
>
> [WITNESS]: I had no idea about that until decades later, which actually meant there was a good chance that I could have had her back[981] [1971]
>
> The adoption order went through on [date], with me never knowing I still had time to change my mind.[982] [1975]
>
> I was not told I had 30 days where I could revoke the adoption if I changed my mind. I believed that from the day of signing that my son was now adopted and there was nothing I could do now but get on with my life, and to forget this ever happened.[983] [1981]

6.130 One mother who was not told about revocation reflected that, because adoption is a legal process:

> Information stating that consent could be revoked up until the final adoption order was granted and how to go about that process - is a vital part of that legal process.[984] [1968]

6.131 A mother in a regional hospital in northwest WA was told stopping the adoption process would cost her money:

> My Mother had me for one week in the hospital. At that time mothers had one month to change their mind. At the weeks end my Mother was told that I had been transferred to Perth to be processed for my adoption. In fact, unbeknownst to my Mother, I remained in the hospital for a further 5 weeks. My Mother was told that if she wanted to get me back, she would need to pay a sum of $800 (A huge sum of money for a single mother in those days) to cover the cost that they had already spent transporting me to Perth. In those days there were no financial support to new mothers in the form of a single mother's pension. In actual fact, my Mother had been lied to. My records clearly indicate that I wasn't transported to Perth until March.[985]

Mothers who knew about revoking consent did not know how to do it

6.132 Some mothers did know about the revocation period, but faced difficulty when trying to navigate the formal process of revocation without support or information on how to do so.

6.133 One mother, whose child was removed at birth, was told she could apply to get her son back within 30 days. She interpreted this as meaning she would be able to have her son within 30 days. She had not been told how to go about applying. She and her mother called St Anne's

980 Submission 104.

981 Private individual 27, transcript of evidence.

982 Submission 1b.

983 Submission 70.

984 Private submission.

985 Submission 29.

to try and recover her child, but were unsuccessful. After 30 days, she was sent a bill for nursery fees.[986]

6.134 One 17-year-old mother at Hillcrest was informed by a private solicitor that she had 30 days within which to revoke her consent, but nothing about how this might be done.

> Hon TJORN SIBMA: how did you learn that you had that right?
>
> WITNESS: Only when the solicitor came. I did not know anything about that beforehand. I had no idea. It was said to me then that I had the 30 days and then I knew, but we were not told that when we were in Hillcrest itself.
>
> Hon TJORN SIBMA: So it was almost at the point where they want you to sign the documents sort of in passing: "Oh, by the way, you've got 30 days." Would it be fair to say that you were not told how you might go about doing that if you did have it?
>
> WITNESS: Absolutely not.[987] [1970]

6.135 A mother explained that while she was aware of the revocation period she did not understand it practically:

> [I] had no legal representation to advise me of the legal parameters of that revocation. The turn of phrase I use in the diary entry 'legally taken from me' (as opposed to 'given by me') on the final date of revocation … I continued to have serious reservations about the consent I had signed in that it was not voluntary and obtained under duress.[988] [1973]

6.136 Another mother wrote words to her son that show she knew about revocation but was conflicted by messaging about adoption being best, and was broken down, and therefore unable to pursue it:

> I want to keep you, so much it hurts me to even think about it. It is not to late to change my mind about keeping you, but please understand why I am not going to keep you. I am trying to do the right thing for you but am I doing the right thing for you. I know you love me for I can feel your love. My love for you is so strong that it is tearing me apart bit by bit … Everything is becoming too much for me for I just can't go on anymore. My mind is like a ball of tangled string not being able to find the beginning. … yesterday was the final D day for me … I really don't know how say sorry to you for I am sure now that I have made a mistake I shall never forgive myself for what I have done.[989] [1972]

6.137 Similarly, a witness stated:

> You could withdraw consent but I had been told I was giving my child a better life, and I was on tranquilisers.[990] [1973]

Mothers wanted their babies back after signing consent

6.138 Mothers explained that they attempted to get their children back after signing consent to adoption and were refused, rather than informed how to go about revoking their consent.

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986 Submission 151.

987 Private individual 15, transcript of evidence.

988 Submission 124a.

989 Submission 112.

990 Private individual 26, transcript of evidence.

6.139 The mother discussed above in paragraph 6.75 recalled:

> When my baby was twelve days old, I went to the adoptions department in the city and saw a woman named [Name] and requested to have my baby given to me. She refused, saying "nonsense your baby has been placed"[991] [1965]

6.140 Similarly, the mother who signed consent 2 days after birth explained:

> During the 30 days, my mother and I continued to ring the hospital and say, we wanted to keep him, but Sister [Name] always told us, he had gone already to a childless couple in the country. I was furious when I found he had been in the nursery for 3 months, when I received some dates given to me by the hospital in the year 2000[992]

6.141 One mother explained that the adoption order for her son did not go through for 9 years. She explained contacting the Department about four months after giving birth:

> About this time, I rang the Govt department which had opened the original file on the Adoption. I wanted to know if he was well and if there were any problems. We were going to get married and "Please put that in the file for the future because It was all a big mistake." They explained that my window to change my mind was past. It was made clear that I should "forget my baby" and that "I would have more later" …. Dismissed.[993] [1968]

6.142 The mother and registered nurse who was admitted to the Mount Hospital as a public psychiatric patient (see text from paragraph 5.139) recounted:

> When I was to be discharged from The Mount, I rang Mrs [Name] the social worker to say that it was clear to me that the adoption was wrong and that somehow I would find a way to raise my son. She promptly told me that that couldn't happen as the future parents were dressing him to take him home. To which I said, "he will just have to be undressed then!" At this moment in time he was still legally my child.[994] [1968]

6.143 In all of these examples, the mothers were legally able to revoke their consent under the law at the time.

6.144 The inquiry also received evidence of parents seeking to stop the adoption after the revocation period, and being told it was too late. One couple hired lawyers to try and reverse the adoption order but were unable to afford the fees to pursue the matter further.[995]

Mothers who tried to revoke consent were dismissed

6.145 In light of the above evidence, it is unsurprising that the inquiry received only one example of a mother who attempted to formally revoke her consent.

6.146 A mother who was involved in the Senate inquiry into forced adoption stated:

> When the 30 day period became law and they had to inform mothers, mothers have testified that they were told it was too late to revoke their consent within that period - the baby had gone.[996] [1968]

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991 Submission 73.

992 Submission 151.

993 Submission 109.

994 Submission 37.

995 Submission 97.

996 Submission 59.

6.147 This was the case for one mother in 1979. After giving birth and signing consent papers, this mother was sent a copy of her documents which noted the latest date for revocation. On the day of signing, she had also been handed an envelope containing a blank 'Revocation of Consent to Adoption' form. She travelled back to Perth from the country, filled in the form and had her signature witnessed at the post office on the final day for revocation. Her account of what happened next is reproduced in the box below, and her completed revocation form is at Figure 15.

Case study: attempting revocation

"Believing I could get my son back, I rang DCP [Department for Community Welfare] and was put through to the woman I had spoken to before. It was about 11:30am and it was a Friday. How wrong I was imagining it would be that simple, a mere formality. …

I told her I had filled in the revocation form and wanted my baby back. She said it was very inconvenient and would have to get the baby in from foster care. When I said I didn't care - the form was signed where did I bring it to. She said it can't be done, the adoptive parents are coming at 1.30 to collect the baby. Records show … Baby was in Ngala and had been there since four weeks old when it is recorded the foster carer got ill …

This was the first I knew about foster care or that the baby hadn't gone straight to 'these wonderful people who needed a baby more than me' as the social worker had made out was going to happen. A bit stunned, I repeated that I wanted my baby, where did I deliver the form? She told me it had to be posted by registered mail, knowing this couldn't occur as it was the final day for revocation, I again asked for an address to deliver it myself, she told me it can't be done and hung up. …

That voice and those words. 'It can't be done' haunted every waking moment for a long, long time. Up till then the only contact had been by phone, there was no office that I had been to and I didn't know where to go. Yes, there was an address on the form and I now know I should have just gone to that address and created merry hell, but something made me think it had to go directly to someone. …

I called back and tried to find where to deliver it but no one could help me. … I didn't know how to track down this person … I didn't even know where to start and gave up. I now realise, I should have been offered the same luxury the adoptive mother was and told to go to Ngala and they would help me. That is where she collected the baby from and they let her stay there too. But as a young, single mother this service wasn't ever extended to me. This unfinished loop plays out in many things being given up before they are completed – such is the repetitive nature of Trauma. …

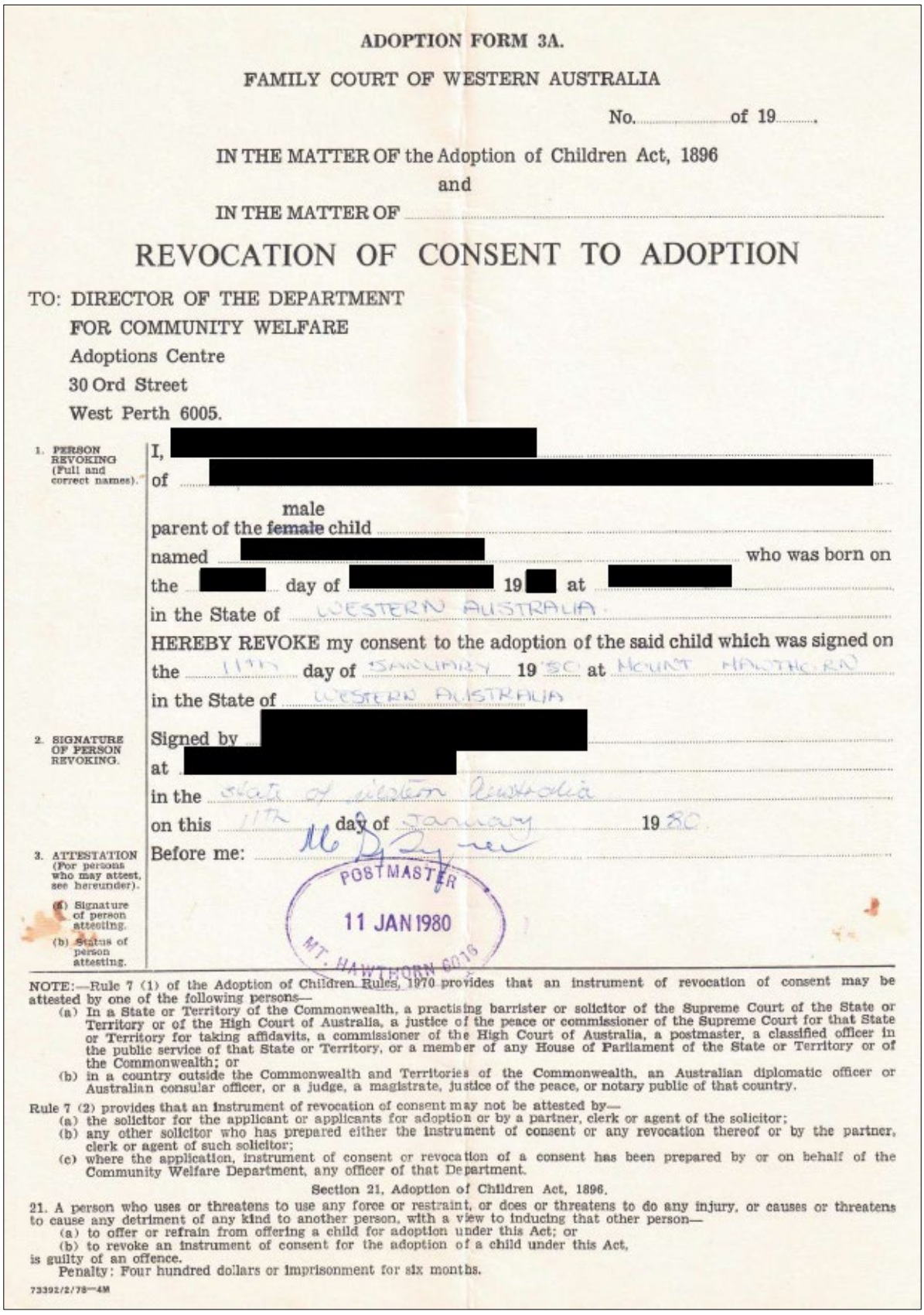
In 2011, I found out there were suspicions in the Dept of Child Protection that this officer was 'bad'.

When I showed my legally completed revocation to the post adoption officer who handed over my records, she said something along the lines of - 'they all thought she was bad, now we know - can I take this out the back and place a copy on your file?'

In 2011 this was 33 years too late! Said yes and asked if there were more (mothers) to be told 'yes'"

[Source: Submission 98]

Figure 15. *Revocation of consent to adoption form, signed and witnessed in 1980*



ADOPTION FORM 3A.

FAMILY COURT OF WESTERN AUSTRALIA

No. ..... of 19 .....

IN THE MATTER OF the Adoption of Children Act, 1896

and

IN THE MATTER OF .....

REVOCATION OF CONSENT TO ADOPTION

TO: DIRECTOR OF THE DEPARTMENT
FOR COMMUNITY WELFARE
Adoptions Centre
30 Ord Street
West Perth 6005.

1. PERSON REVOKING (Full and correct names).

I, [redacted]

of [redacted]

male
parent of the ~~female~~ child

named [redacted] who was born on

the [redacted] day of [redacted] 19[redacted] at [redacted]

in the State of WESTERN AUSTRALIA.

HEREBY REVOKE my consent to the adoption of the said child which was signed on

the 11th day of JANUARY 19 80 at MOUNT HAWTHORN

in the State of WESTERN AUSTRALIA.

2. SIGNATURE OF PERSON REVOKING.

Signed by [redacted]

at [redacted]

in the State of Western Australia

on this 11th day of January 19 80

3. ATTESTATION (For persons who may attest, see hereunder).

Before me: [signature]

(a) Signature of person attesting.

(b) Status of person attesting.

POSTMASTER
11 JAN 1980
MT. HAWTHORN 6016

NOTE:—Rule 7 (1) of the Adoption of Children Rules, 1970 provides that an instrument of revocation of consent may be attested by one of the following persons—

(a) In a State or Territory of the Commonwealth, a practising barrister or solicitor of the Supreme Court of the State or Territory or of the High Court of Australia, a justice of the peace or commissioner of the Supreme Court for that State or Territory for taking affidavits, a commissioner of the High Court of Australia, a postmaster, a classified officer in the public service of that State or Territory, or a member of any House of Parliament of the State or Territory or of the Commonwealth; or

(b) in a country outside the Commonwealth and Territories of the Commonwealth, an Australian diplomatic officer or Australian consular officer, or a judge, a magistrate, justice of the peace, or notary public of that country.

Rule 7 (2) provides that an instrument of revocation of consent may not be attested by—

(a) the solicitor for the applicant or applicants for adoption or by a partner, clerk or agent of the solicitor;

(b) any other solicitor who has prepared either the instrument of consent or any revocation thereof or by the partner, clerk or agent of such solicitor;

(c) where the application, instrument of consent or revocation of a consent has been prepared by or on behalf of the Community Welfare Department, any officer of that Department.

Section 21, Adoption of Children Act, 1896.

21. A person who uses or threatens to use any force or restraint, or does or threatens to do any injury, or causes or threatens to cause any detriment of any kind to another person, with a view to inducing that other person—

(a) to offer or refrain from offering a child for adoption under this Act; or

(b) to revoke an instrument of consent for the adoption of a child under this Act,

is guilty of an offence.

Penalty: Four hundred dollars or imprisonment for six months.

73392/2/78—4M

[Source: Submission 98]

6.148 The Department's 1978 internal guide frames revocation as a hypothetical, rather than an actual, process:

> Sometimes a young mother… may have second thoughts and decide to keep her child. In this case the child *would* be returned to the Department by the foster mother and given to the natural mother.[997]

6.149 The Committee asked the Department of Communities how many revocations were accepted by the Department, and how many were unsuccessful. The Department said answering the questions would require systematically examining all historic adoption client records held by it, and did not provide an answer.[998]

6.150 Evidence suggests that revocation was not available to mothers in practice, despite being provided for in legislation.

FINDING 13

Many mothers did not know the law provided for them to revoke their consent to adoption. Those who did were not told how to do this. Those who tried to revoke their consent were dismissed. Although revocation of consent was technically available to them, in practice the procedures of the time meant they were unable to do this.

The adoptions concerned

6.151 Parents who signed consent to their baby's adoption were not empowered to make an informed decision by being told what it truly entailed. This section considers the lived experience relevant to who adoptive parents were and the actual process followed in effecting adoptions.

Parents were told lies about prospective adopters

6.152 In addition to the examples at paragraph 4.141, unmarried women were often told that if they agreed to adoption their baby would 'would only be given to a poor couple who couldn't have babies of their own'.[999] In fact, some adopted children were given to people who already had biological children and/or who went on to have them. Some who encountered infertility after becoming parents wanted further children to complete their families,[1000] or to 'replace' children who had died – see paragraph 5.99. That mother submitted:

> My son was adopted by a mother who was divorced twice and had 2 sons by the first marriage … My family was told he was adopted out to a couple in the country with no children and was very happy.[1001]

6.153 A husband and wife in evidence considered unfit to raise their child in 1968 because they were not married when he was born were devastated to learn that the couple who adopted their child was not married either.

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997 Department for Community Welfare, Adoption Information and Procedures (1978), p 7 (italics added), attached to Department of Communities, email, 7 June 2024.

998 Department of Communities, email, 7 June 2024.

999 Submission 98.

1000 For example: Submission 134.

1001 Submission 151.

6.154 The mother explained:

> the doctor offered that he had patients that were wishing to have a child … He told me that this couple were in their second marriage and that the gentleman was infertile and that the woman had lost her children in a car accident along with her husband … I must admit that I felt very sorry about that for them, so I thought they would be very grateful and happy to have my baby. I thought at least he was going to go to a good couple and the woman had already had children so I thought she would be a mother that would know how to handle a young baby.[1002]

6.155 Soon after their child was born and taken for adoption, the parents in evidence married, and had 2 further children. They never stopped wanting to find their first child.

6.156 When they received their records, the couple learnt that the adoptive parents were not married until a year after their child's placement for adoption, because they were awaiting their divorces to come through. They had no children together, but one had 4 children interstate. The Department became aware of this a year after the child had been placed through private arrangements, when they visited the home and urged the prospective adoptive parents to finalise the adoption process. However, they did not do so: the adoption order was not made until 9 years later, and the papers filed included the consents signed shortly after the child's birth. The adoptive parents then divorced shortly after. The mother said that she and her husband were in a position to bring their first child home to be with his whole family.

6.157 A witness testified that approximately 30% of couples went on to marry and have further children after losing their firstborns to adoption.[1003] For these parents, adopted people and their siblings, their separation is a particularly pointless and avoidable tragedy.

6.158 The idea that unmarried parents – no matter their future marital status – were unfit to raise their own children and that their children were better off with strangers was wrong. Yet, it was a central part of the messaging many mothers were subjected to and continue to suffer from. Dr Cole's research found that idealising 'adoptive families as necessary and desirable for babies' to promote adoption to mothers was a practice employed to obtain their consent.[1004] Another mother told the Committee:

> This was not about the welfare of the child, rather the obtaining of babies by any means and without care or thought for the consequences of doing so. … I am always mindful of a mother whose comment about adoption was: They said my daughter needed a father and gave her to a paedophile.[1005]

Screening of prospective adopters was inadequate or non-existent

6.159 The requirements to investigate and report on people seeking to adopt changed over time (see Chapter 3).

6.160 In 1964, a mother who was married by the time she gave birth was told she should sign consent to adoption because she was an apprentice, whereas the prospective adoptive parents had a house and a healthy bank balance. This was despite the fact her husband, the child's father, had a full-time job.

1002 Private individual 24, transcript of evidence and tabled paper 1.

1003 Private individual 14, transcript of evidence.

1004 Submission 72.

1005 Private individual 14, transcript of evidence.

> The CHAIR: Do you know whether any checks were done on the adoptive parents? Were they checked out to make sure they were suitable people to adopt a child?
>
> [WITNESS]: Well, the checks were that they owned a house and they had £3 000 pounds in the bank.
>
> The CHAIR: So as long as they had a house and some money, that was good enough?
>
> [WITNESS]: That was good enough.[1006]

6.161 Submissions described a lack of criteria for adopting besides being '"white and married".[1007] However, in 1971, a non-Aboriginal person was adopted into a family with an Aboriginal father.[1008] This person submitted that their adoptive parents were not screened in any way, because the barrister arranging the adoption was a relative of the adoptive mother.

6.162 Other contributors spoke and tabled documents about prospective adoptive parents only being required to provide their marriage certificates and results of a chest x-ray. An adoptive mother testified that when she and her husband adopted in WA in 1973, they had an interview and were visited by the Department at home: 'That was it'.[1009]

6.163 Some adoptive parents were themselves adopted, or had themselves lost a child to adoption prior to marriage.[1010] Of the latter, an adopted person observed: 'It doesn't take a genius to figure out that a scenario like this is going to be a high risk situation for an adopted child.'[1011]

6.164 Many adopted people were damaged by their experiences in their adoptive families, and this was extremely painful for their parents to later learn. While this is explored further in Chapter 9, it is important to note here in relation to the roles played by government and private institutions and service providers as adoption agents discussed in the chapters that follow.

6.165 Both parents and adopted people continue to experience distress in relation to the lack of care with which adoptions were arranged. Adopted people stated:

> I wanted to talk about parent selection. … I am curious about how they chose parents. How do you choose a parent to get a baby? … I can say with certainty that the woman who adopted me was not fit to be a mother.[1012] [1960]
>
> Steal a child and give it to whomever, is what I've come up with, after years of speaking to so many and researching the numbers of ppl (babies and children) put into the care of mentally unstable 'parents' and the abuses suffered.[1013] [1969]
>
> My adoptive parents were old enough to be my grandparents.[1014] [1965]

6.166 Adoption negatively impacted adopted peoples' lives, whether placed in dysfunctional families or otherwise. One adopted person shared how in 1972 children went through a

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1006 Private individual 21, transcript of evidence. In relation to children adopted into families that were not financially well-off, see Submission 57.

1007 Submission 1b.

1008 Submission 29.

1009 Private individual 11, transcript of evidence.

1010 For example: Submission 142; Submission 29.

1011 For example: Submission 29.

1012 Private individual 18, transcript of evidence.

1013 Submission 103.

1014 Private individual 22, transcript of evidence. See also: Submission 57.

medical check prior to their placement with prospective adopters. The person described his reaction when reading his records:

> A doctor's report attests, *as far as I could determine, the child was in good health and free from physical and mental defect*. I laugh bitterly. This warranty is void. If only they'd known that adoption causes mental defect.[1015]

Adoption was treated as if it was birth

6.167 As laid out in Chapter 3, in many ways adoption was treated legally as if it was birth. In Evidence revealed that children adopted were renamed.[1016] Children's entries on the register of births were amended to reflect the adoptive parents. New documents were then issued.

6.168 When they found one another, a mother sent her daughter a copy of her original birth certificate. She described:

> [My daughter] said when she saw her name and what I had called her and then what her name was changed to, she felt like who she was meant to be was erased by the sweep of a pen. It badly affected her when she saw it.[1017]

6.169 Adoptive parents were eligible for the Commonwealth child endowment payments and some received instructions on how to claim. This was in stark contrast to mothers in evidence, who were not provided with that information.[1018]

Adoptive parents were not adequately supported

6.170 Despite the legal relationship established between adoptive parents and adopted children, upon placement children met strangers who had no prior bond with them. Adoptive parents were not prepared for this difficulty, or psychologically supported to cope well with situations that subsequently developed. In 1978, adoptive mothers were merely offered practical training in 'mothercraft', and the Department could counsel adoptive parents on how to approach telling the child they are adopted.[1019]

6.171 Professor Geoff Rickarby, a consultant psychiatrist, gave evidence to the New South Wales parliamentary inquiry into historical adoption practices in 1998. He and his colleague wrote the book *Adoptive Families in Distress*, based on their clinical encounters with forced adoption patients. He submitted to the New South Wales inquiry:

> the adoptive family had no training in dealing with the inevitable identity disorder of the adoptive child, because, once the adoption was confirmed, they were left to do whatever they would, with no help or guidance about the special difficulties. The cultural myth was that it would be "just like having your own children".[1020]

6.172 Further, many adoptive parents carried unresolved grief about their infertility. This played out in the relationships they developed with their adopted children. One adopted person described that she always felt 'less than' growing up within her adoptive family:

1015 A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, p 205, in Submission 112.

1016 For example: Submission 1; Submission 52; Submission 63; Submission 97; Submission 148; Private individual 15, transcript of evidence.

1017 Private individual 15, transcript of evidence.

1018 For example: Private individual 22, answers to questions on notice.

1019 Department for Community Welfare – Adoption Information and Procedures (1978), attached to Department of Communities, email, 7 June 2024.

1020 Dr G Rickarby, Consultant Psychiatrist, submission 254 to Standing Committee on Social Issues inquiry into adoption practices 1950–1998, Legislative Council, New South Wales, in Submission 72.

> They wanted their own child and I could not fill that.[1021]

6.173 Rather than being supported to process grief, infertile adoptive parents were provided adopted children as a solution. This also seemed to be the case when their biological children died, as in the example at paragraph 6.152, above.

6.174 Adopted people described their experiences of growing up in such contexts:

> I still have no idea what compelled my adoptive parents to go through with adopting a child as it seemed they derived no pleasure or happiness from raising me. They did meet all their legal obligations (i.e. I was fed, watered, clothed and sheltered), however I was not loved or shown any kind of care/affection. I question whether social services felt this was adequate for adopted babies, or whether this falls into the scope of adopted children being grateful for whatever scraps they are given[1022]

The welfare of adopted children was not safeguarded

6.175 Some adopted children did not receive any follow-up visits to check on their welfare. An adopted person who suffered serious neglect from the outset said:

> The visits from Child Welfare 4 times a year never happened, not one visit in my whole life. The government never cared. … Unsupported adoption was an unforgivable path for the govt to go down when we children (already one of the victims) are further alienated by not knowing our roots, not being individually assessed so our needs can be met and never once being followed up on or checked on.[1023]

6.176 An adoptive mother who received a child into her care in 1973 described that, once it was placed, she did not hear from the Department until the child needed medical treatment at 10 months old. She stated:

> because he was in hospital and we still had not legally adopted him, they were notified and they came out to see us. I was pretty angry with them when they turned up. … I expected to see them regularly after we got him. I mentioned he could have been dead and buried in the back yard and they would never have known.[1024]

6.177 Records received by some contributors document visits by Department workers prior to adoptions being finalised. One mother said that when she inquired how her baby was faring after this point, she was told that contact between the Department and the family ceases after an order of adoption is made:

> She said the fact that the family had "not come under the notice of the Department" was another indication her "happy future was assured". Obviously, in retrospect, this was not so but their attitude seemed to be no news is good news.[1025]

6.178 Another mother was understandably incensed upon realising the records relating to her child's adoption made no reference to monitoring their welfare. She submitted:

1021 Private individual 22, transcript of evidence.

1022 Submission 134.

1023 Submission 17.

1024 Submission 142; Private individual 11, transcript of evidence.

1025 Submission 1b.

> nothing was done to ensure care was provided. The infant was a departmental charge and the lack of care is unbelievable when the general perception held by their officer was that I as the mother couldn't look after this baby so it needed to be taken off of me. An extended period of time was to elapse before an 'Application to Adopt' was made almost eight months later. During the intervening months there is no record of monitoring or welfare checks being carried out – none at all.[1026] [1979]

6.179 Isobel Andrews, counsellor and manager at Adoption Jigsaw WA, began her career in adoption working for the Department and was involved in the placement of children and following-up. She testified that it was not really possible to vet adoptive parents, because many people are able to present well at a single point in time. However, if it was clear to those in authority that screening and welfare visits were more a checkbox than a safeguard, the implication is that adoption itself carried inherent, serious and known risks for all children placed.

6.180 Ms Andrews stated:

> It is a joyful time when you have a new baby; generally speaking, it is just lovely. There is that looking at it. It is when the baby gets older that the problems develop, not in that first year. I do not know that there is any way you can change that. If you think of marriage, the vast majority of people going into marriage believe it is going to be forever and that they are in love and that it is wonderful, yet we have a 30 per cent to 50 per cent divorce rate. I think as human beings who we are when we do something changes over time. Where you might be when you adopt the child maybe a very different place from where you are five years later.[1027]

6.181 The Committee takes the valid point that no child is guaranteed a positive experience growing up in any family, even when things start well, and despite best intentions. However, in the case of those forcibly adopted, there were insufficient safeguards to ensure children were not placed at risk.

Some placed children were technically under the guardianship of the Department for years

6.182 The evident lack of monitoring of some placed children who were clearly not safe in their adoptive families is particularly problematic because, from 1970 onwards, the Director of the Department remained the legal guardian of children between the taking of consent and the making of an adoption order.

6.183 Children were routinely placed with prospective adopters prior to an adoption order being made. In many cases, the prospective adopters did not apply to the court for an adoption order immediately, and additional time passed. Even once an application was made to the court, it took time to be determined by the court. It was not uncommon that a year passed between children being placed with prospective adopters and an adoption order being made. In several cases a 2 year period transpired. As described above, in one instance the length of time was 9 years.[1028]

6.184 The role of the WA government is the subject of the next chapter.

[1026] Submission 98.

[1027] I Andrews, Counsellor and Manager, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

[1028] See: Submission 29; Submission 109; Private individual 3, transcript of evidence; Private individual 30, tabled paper 1.

Mothers who kept

Adoptions increased as more unmarried women kept their babies

6.185 An adopted person said that until the 1940s the status quo in Australia was that children born outside of marriage were 'naturally absorbed' and raised by their mothers.[1029] However, even as adoption became more popular from this point, the statistics discussed in the introduction make clear that most unmarried mothers in WA who gave birth during the inquiry period did not have their children adopted. There were only 5 years when the number of adoption orders compared to ex-nuptial births was 50% or more: 1942 (63%), 1947 (51%), 1948 (50%), 1949 (50%), and 1950 (53%) (see Table 5). From 1950 this percentage fell and generally continued to do so. Adoption therefore became less common amongst unmarried mothers within the community as time progressed.

Table 5. *Ex-nuptial births and adoption orders in WA 1940–1989*

Year	Ex-nuptial births	Adoption orders	%
1940	326	133	41%
1941	356	166	47%
1942	340	215	63%
1943	434	140	32%
1944	448	188	42%
1945	510	231	45%
1946	529	243	46%
1947	475	244	51%
1948	490	244	50%
1949	504	253	50%
1950	521	274	53%
1951	612	275	45%
1952	634	258	41%
1953	707	273	39%
1954	712	237	33%
1955	780	288	37%
1956	796	262	33%
1957	795	277	35%
1958	854	290	34%
1959	904	316	35%
1960	921	332	36%
1961	959	339	35%
1962	1005	360	36%
1963	1229	326	27%
1964	1311	448	34%
1965	1439	487	34%
1966	1607	561	35%
1967	1944	570	29%
1968	2014	611	30%
1969	2231	540	24%
1970	2316	703	30%
1971	2720	301	11%
1972	2632	457	17%
1973	2497	717	29%
1974	2352	783	33%
1975	2527	528	21%
1976	2621	531	20%
1977	2528	497	20%
1978	2654	417	16%
1979	2783	380	14%
1980	2833	357	13%
1981	3300	281	9%
1982	3316	236	7%
1983	3647	235	6%
1984	3489	198	6%
1985	3886	32	1%
1986	4481	30	1%
1987	4623	48	1%
1988	5314	38	1%
1989	5415	19	0%

[Sources: Western Australian Year Book (various years); Annual reports of Child Welfare Department 1927–1972; Annual reports of Department for Community Welfare 1972–1984]

[1029] Submission 110.

6.186 Although the percentage of ex-nuptial births that led to adoption decreased over time, this also coincided with increased numbers of adoptions over the course of the 1960s and 1970s, most of which were adoptions of ex-nuptial children.[1030] A mother whose child was taken in 1981 questioned the reasons forced adoptions happened to some people and not others:

> I had a very difficult time trying to understand why some people got to hold, see, and name their child and I was denied this. No one can tell me why some did, and some were denied everything. I still struggle with this from time to time.[1031]

6.187 This inquiry was framed around forced adoption, and so little evidence was received regarding the majority of unmarried mothers that kept their children. Yet it is worthwhile considering what relevant evidence was submitted, to better understand the determinative factors.

Family support sometimes made a difference

6.188 Mothers recall counterparts who had the support of their families and who planned, or were ultimately able, to leave with their babies.

> On admission I was placed in a ward of four and during my confinement remember a rotation of women occupying the beds. Some birthed quickly and others like me had problems and been admitted for 'observation'. I remember a young pregnant single woman who had family support and who was going home with her baby[1032] [1973, KEMH]

> My roommate [Name] went to hospital while I was there and gave birth to a son. She came back to the home and her parents came to take her back to their wheatbelt farm I thought I would never see her again, but she came back 48 hours later to collect her son. Her parents were going to help her support him while she went back to work. Not many others did that.[1033] [1966, Ngala]

> of the girls who was in the dorm that I was sleeping in changed her mind and decided to keep her baby. She had support outside the home. She was made to feel very, very bad because she decided to keep her baby. She left early. She was made to feel very guilty that she wanted to give up.[1034] [1970, Hillcrest]

6.189 However, as already discussed, some women had the support of their partner, or one or both of their parents, and still had their child taken for adoption against their will. One maternal grandmother was present when her grandchild was born and removed, and both grandparents later came back to the hospital in an attempt to bring their daughter her child, without success (see paragraphs 5.40 and 5.76).

6.190 Another maternal grandmother was interstate but clear in interactions with Department staff that she did not want her daughter's child adopted, but rather to assist her. She was ignored. The adopted person stated:

> My mother's sister … also had a child out of wedlock in the 1960s, but with family support, [she] raised her daughter. If the WA government had listened to my

[1030] See Figure 1. *Adoption orders and ex-nuptial adoption orders in WA 1968–1978*.

[1031] Submission 70.

[1032] Submission 124a.

[1033] Submission 108.

[1034] Private individual 15, transcript of evidence.

> family, I would have been raised with my family; I would not have been taken.[1035] [1965, KEMH]

Some mothers and babies were saved by the intervention of a third party

6.191 An adopted person described how she would have been adopted were it not for the presence of a friend able to intervene on her 18-year-old mother's behalf when told to sign consent papers.

> Over the Years my mum told me … that when I was born King Edward memorial Hospital tried to take me away from her, to put me up for adoption, she was really upset by this experience, she said that if it wasn't for a friend of the family … who was with my mum at the hospital and stood up for my mum, I would have been adopted out, my mums grandparents agreed to take my mum and myself[1036]

6.192 Conversely, some grandparents worked collaboratively with adoption workers. Two mothers described how, when their interstate family members arrived at the hospital, it was to ensure they did not return with the baby.[1037]

Some women managed to keep their babies alone

6.193 One mother explained that she was 'strongly coerced' into adopting her ex-nuptial daughter out in the 1970s, however did not state exactly where her experience occurred. She said:

> They made me feel that I would have done the wrong thing, by my daughter, to keep her & they made me feel worthless. I'm so glad I was strong enough that I didn't submit to their stand over tactics.[1038]

6.194 The Committee received only one clear account from an unmarried mother who kept her child in WA. Her experience is summarised in the box below.

No common attribute made forced adoption an inevitable outcome

6.195 The inquiry received examples from and about a wide range of mothers. Mothers' circumstances varied, and their experiences of forced adoption had different combinations of potentially contributing factors such as age and experience, isolation, and partner or family support.

6.196 The women who often unwittingly entered into an adoption process all conceived out of wedlock, but this in itself did not make their experiences inevitable: many of their counterparts were not on the path to adoption, and some who were managed to exit the process. In the boxed example, the same unmarried mother, in the same circumstances at the same time, managed to keep her baby through sheer determination. This was not a possibility for many of the mothers in evidence, who were subjected to sustained pressure, underhand tactics and coercion.

[1035] Private individual 22, transcript of evidence.

[1036] Submission 75.

[1037] Submission 37; Submission 124a.

[1038] Submission 3.

Case study: a mother who kept

For one unmarried mother completing her nursing training, it was the experience of having her first daughter taken for adoption that enabled her to keep her second. Her first daughter was born at St Anne's in 1967 when she was 18. The next year, she again fell pregnant, but concealed her pregnancy. When she went into labour with her second daughter while on shift, her supervisors delivered her baby. She described:

> I was taken to St Anne's Hospital and they took my baby away. I had torn giving birth and a Dr stitched me up without any local anaesthetic telling me it was what I deserved. I begged to see my baby but was not allowed. On the 2nd day I went and sat outside Sister [Name]'s office and said I was not moving until they gave me my baby back, I was not going to let them have this one too. … I sat there for a few hours before I went into her office. I don't know but presume she contacted my Mother. I was very determined so nothing they said would have changed my mind. I went back to my room and they brought [my daughter] to me. I just held her tightly and cried.[1039] [1967]

After being stitched, this mother's breasts were bound; however, when she was given an anti-lactation tablet she did not swallow it. This small action enabled her to breastfeed her baby until she returned to nursing, where her supervisor had compassionately arranged 12 weeks leave.

The mother went on to stay at St Anne's for a further 8 days, and experienced a shift in the way she was treated:

> I stayed at St Anne's with [my baby] near me during the day and she went to the nursery at night. The Nuns were kind once they knew I would not change my mind. They helped me to start breastfeeding [my baby] and took good care of my tear.

At her mother's insistence, this mother applied for maintenance from the child's father. She endured a harrowing court experience, was successful, and received a small sum.

[Sources: Submission 52; Submission 52a]

6.197 As considered in Chapter 3, the law of adoption was amended throughout the 20th century. Early legislation was minimal, and the processes of adoptions were left for agencies and the community to establish. Later amendments to the law were made with the intention to clarify processes and protect mothers, including against coercion and pressure. However, Hansard indicates that Members of Parliament often had an understanding of adoption which was inconsistent with the actual practices taking place. The development of the law, and the commencement of amendments, often did not keep pace with the practices that had emerged and the issues that they were causing.

6.198 External forces both acted on, and failed to act to protect, unmarried mothers whose children were taken for adoption against their will. Chapter 7 and Chapter 8 examine the roles past WA governments, private institutions and service providers played in implementing these policies and practices.

[1039] The determined way in which this mother subsequently managed raising her young child alone is described at paragraph 4.57.

CHAPTER 7
The role of the WA government

7.1 Throughout the 20th century, many responsibilities in relation to adoption in WA rested with state government agencies. The three agencies with the most direct and significant involvement in adoption were the departments now named the Department of Communities, the Department of Health, and the Department of Justice.

7.2 This chapter considers each of these state government agencies, their responsibilities, and their role in forced adoption.

7.3 While this chapter addresses them separately, the departments now known as Department of Communities and Department of Health worked co-operatively in relation to the adoption of children.

Department of Communities

7.4 The department now known as the Department of Communities has undergone multiple changes in title, sometimes accompanied by amalgamations with other government departments. Chapter 2 lists the historic titles for this agency.[1040] The 3 department names relevant to this report are:

- Child Welfare Department: 1927 to 1972
- Department for Community Welfare: 1972 to 1985
- Department of Communities: 2017 to present.[1041]

7.5 The cases of forced adoption within the lived experience evidence all occurred when the Child Welfare Department and Department for Community Welfare were the relevant names for this department. In this section, where one is specifically discussed, the full name is used. However, when the discussion relates to the actions of both the Child Welfare Department and the Department for Community Welfare over time, they are collectively referred to, as elsewhere in this report, as the 'Department'. When these departments are discussed alongside or in connection with other Government departments, such as the Department of Health, they are referred to as 'CWD/DCW'.

The Department has always been the primary government agency for adoptions in Western Australia

7.6 Although the Department's role in adoption varied over the years, it had a significant role throughout the 20th century.

7.7 When it commenced in 1896, the law governing adoptions in WA did not specify a government agency to oversee those processes. However, records from as early as the 1920s indicate that adoption was usually considered alongside child welfare issues, including children in state care and institutions.

7.8 The State Children Department (as it was then known) was responsible for child welfare matters and became the leading agency arranging and facilitating adoption of children from

[1040] See: State Records Office of WA, AU WA A1954 - Department of Communities, accessed 25 July 2024.

[1041] The current role of the Department of Communities is dealt with elsewhere in this report. For the Department's current role in access to records, please see Chapter 12. For the Department's response to forced adoption, including any apology and reflections, please see Chapter 15.

at least 1922, and likely well before. The State Children Department's annual report for the year ended 30 June 1922 stated:

> The majority of cases dealt with by the Supreme Court under the adoption of Children Act are submitted by this Department.
>
> The grand total of all adoptions arranged by the Department to the 30th June, 1922, was 566.
>
> Forty-eight cases were completed during the year just ended. Eighteen of this number were State children.[1042]

7.9 In 1927, the State Children Department became the Child Welfare Department. From the 1920s until 1959, the role and responsibilities of the Child Welfare Department relating to adoption were as follows:

- discussing adoption with prospective adoptive parents
- keeping record of prospective adoptive parents (applicants)
- investigating and reporting on applicants
- approving or refusing those who wished to adopt
- placing children in the care of prospective adoptive parents (often approved applicants)
- preparing necessary paperwork and documents for proceedings in the Supreme Court seeking an order of adoption
- contributing to reform of the Adoption of Children Act.

7.10 When referring to the Child Welfare Department's role during this period, it is important to distinguish between the adoptions the Child Welfare Department arranged and other entities such as private solicitors. The Department was not required by the legislation to prepare a report on the applicants for 'private' adoptions. However, Hansard indicates that it was still often involved in those matters to a lesser extent. Where the adoption was arranged through a doctor, hospital, or other service, the Supreme Court would routinely refer the matter to the Child Welfare Department for notification of whether it had knowledge of the parties.[1043]

7.11 During the Child Welfare Department era from the 1920s to 1959, there was a shift in perceptions of adoption. The numbers of adoptions, and waiting lists to adopt, were steadily increasing.

7.12 By 1959 solicitors arranged most adoptions, rather than the Child Welfare Department. For example, from 1956 to 1959, there were a total of 277 applications granted. Of those, 50 were arranged by the Child Welfare Department, and 227 by solicitors.[1044] The Department's only required involvement in those 227 adoptions that solicitors arranged between 1956 and 1959 was a notification from the Child Welfare Department to the Supreme Court of whether it had knowledge of the parties to the adoption.

7.13 From 1959, the Department's legislated role expanded significantly to include managing the approvals processes for non-government entities that wished to arrange adoptions, and providing reports on all applicants for adoption, whether arranged through the Child Welfare Department or privately. This requirement to provide a written report meant that from 1959 onwards, the Child Welfare Department was involved in every adoption in Western Australia.

1042 State Children Department, *Annual Report*, 1922, p 5.

1043 Legislative Council, *Debates,* 1959, 2101.

1044 Legislative Council, *Debates,* 1959, 2232.

7.14 Public Service Lists available from the 1960s show a variety of positions within the Child Welfare Department at that time. Where officers from the Child Welfare Department were identified in evidence by name, they were almost always listed as part of the Department's 'Field Division'.[1045]

7.15 The primary roles within the Field Division of the Department were Social Workers, Family Welfare Officers, and District Officers. Surprisingly, the officers who interacted directly with mothers in evidence were almost overwhelmingly Family Welfare Officers rather than Social Workers, despite the mothers' perception that the employees that engaged with them were social workers.

7.16 An internal Instruction Manual from 1972 set out the roles and responsibilities of certain positions:

- Field Officers were authorised under the *Child Welfare Act 1947* and other Acts – which were not specified but may have included the Adoption of Children Act – to carry out their duties.[1046] It does not appear that the Field Officers carrying out work under the Child Welfare Act were distinguished from those carrying out work under the Adoption of Children Act. Instead, it appears from the manual that all officers within the Field Division were given broad authorisations.
- Family Welfare Officers investigated cases, appeared before Courts, and reported to Courts concerning the wellbeing of children and families.[1047] Their duties included working in co-operation with other agencies, clinics, departments or persons concerned with child and family care. They were also responsible for escorting 'wards and other children from place to place as required for special treatment, or their general welfare'. They were also to undertake 'investigative and preventive work' in relation to Acts under the control of the Minister for Community Welfare.
- Family Welfare Officers were also the officers who investigated prospective adoptive parents, prepared reports on adoptive parents, reported to and appeared in Courts, worked with families regarding the adoption of their children, transported children, and worked with other agencies such as hospitals and institutions.
- Social Workers were professionals who held certain qualifications. They were to investigate cases and appear before Courts if required. They provided reports. They worked in co-operation with other agencies, clinics, departments or persons concerned with child and family care.
- District Officers appeared to be a more versatile role to perform roles in 'district offices'. Their duties included maintaining a 'district office' and visiting areas within that district. They supervised clerical staff, applied the provisions of Acts administered by the Department within their district. They conducted pre-Court inquiries regarding children, attended Courts, supervised the progress of children under supervision or on probation, and sought suitable accommodation and employment for those children. They investigated applications under the Welfare and Assistance Act, and made reports and recommendations to the Head Office. In relation to adoptions, it is specifically noted that these officers were to inspect and report on applicants to adopt and foster children. They would also investigate matters as required by the Supreme Court (which handled

[1045] It is notable that the only other state government department with a listed Field Division during the 1960s was the Native Welfare Department.

[1046] Department for Community Welfare, *Instruction Manual*, 1972 ('Ministerial Authority for Field Officers'), accessed 27 May 2024.

[1047] Department for Community Welfare, *Instruction Manual*, 1972 ('Family Welfare Officer'), accessed 27 May 2024.

adoptions) and would investigate where the welfare of any child or person was 'causing concern'.[1048]

7.17 Each of the above roles reported to the 'Social Work Supervisor'. This position was responsible for supervising the application of the Acts administered by the Department, and the performance of staff. They were to 'advise, assist and, if necessary, direct field staff as to the standard and nature of their casework'.[1049] This indicates that, at least from 1972 onwards, there were clear reporting and supervisory expectations regarding the work of officers at the Department involved in adoptions. There was no evidence available regarding how (and to what extent) this internal policy was implemented in the actual practice of the Department.

7.18 From 1970, when the 1964 amendments to the Adoption of Children Act commenced operation, the Child Welfare Department became the guardian of a child between the giving of necessary consents and the making of an adoption order. The Child Welfare Department was responsible for the care of these children, who had usually been placed with prospective adoptive parents or in foster care.

7.19 In 1972 the Child Welfare Department ceased operations. Child welfare and adoption matters became the responsibility of the new Department for Community Welfare. The Native Welfare Department also ceased operations in 1972. Records for the Department for Community Welfare indicate that this new Department was an amalgamation of the Child Welfare Department and the Native Welfare Department. All duties of the Child Welfare Department were carried to the new Department. Duties relating to child welfare which had previously been the responsibility of the Native Welfare Department became the duties of the Department for Community Welfare.

7.20 This amalgamation also saw the officers of each Department absorbed into the new Department. Importantly, this included the social workers, family welfare officers, and district officers. Multiple officers named by mothers who had given birth after 1972 had originally been officers of the Native Welfare Department who had moved to the new Department for Community Welfare's Field Division in 1972. The movement of officers in this way is particularly notable given the recognised use of forced adoption to effect the policies that created the Stolen Generations[1050] and the many parallels between the treatment of Aboriginal mothers in the Stolen Generations era and of non-Aboriginal mothers in the era of forced adoptions, both before and after 1972.

7.21 Another feature of the Department from at least 1964 onwards was the use of 'Honorary' officers.[1051] These were volunteers paid an honorarium of $20 a year in 1972. They handled tasks that officers of the Department were too busy for, including tasks relating to children. There were no records available to the Committee regarding the precise role, if any, that honorary officers played in relation to past forced adoption.

7.22 As outlined in Chapter 3, from 1972 onwards, the Department for Community Welfare's view of whether an applicant was a proper person to adopt became even more important. Where the Department considered the applicant a proper person, this was conclusive evidence that they were a proper person. However, if they were of the view that the applicant was not a

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1048 Department for Community Welfare, *Instruction Manual*, 1972, accessed 27 May 2024.

1049 Department for Community Welfare, *Instruction Manual*, 1972, accessed 27 May 2024.

1050 Human Rights and Equal Opportunity Commission, *Bringing them home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families*, Commonwealth of Australia, May 1997, Part 1, Chapter 1.

1051 Legislative Council, *Debates,* 1964, p 2631. See also: Department for Community Welfare, *Instruction Manual*, 1972, accessed 27 May 2024.

proper person, this was not conclusive evidence and the applicant was still free to persuade the judge that they were.

7.23 This was a tremendous shift of power and responsibility to the Department.

7.24 The introduction of 24A appeared to reduce accountability. This section protected any officer of the Department or those who carried out any duty or function under the Act. Anything for the reasonable or probable cause in promoting the welfare and interest of a child was done 'pursuant to the Act'. This meant that the protection was broad and could technically protect anyone doing anything for the welfare or interest of a child from liability.

FINDING 14

The Department now called Department of Communities was directly involved in and responsible for adoptions under the *Adoption of Children Act 1896* (WA) throughout the 20th century.

From 1959 onwards, the Department provided reports on all applicants for adoption, which meant that it was involved in every application for an adoption order within Western Australia.

From 1971 onwards, the Department's reports as to whether an applicant for adoption was a 'fit and proper person' became conclusive evidence as to that fact, which placed it in a position of significant power and responsibility.

The Department's role in adoption practice was extensive

7.25 Although a part of the Department's role in adoption was set out in legislation, in practice it was also involved throughout the process. In its 1939–1941 Annual Report, the Department seemed surprised by the significance of its role in adoption:

> Although not a normal function of the Department, most of the legal adoptions arranged in Western Australia seem to be handled by the Child Welfare Department.[1052]

However, this quickly shifted. Its 1947 Annual Report states:

> The Department is instrumental in arranging the legal adoption of children. Orders of adoption are granted by the Judges of the Supreme Court and the applications are handled either by this Department or by solicitors.[1053]

7.26 The Department routinely arranged adoptions, moved babies, generated necessary documentation, coordinated the signing of papers by both parties, and prepared and lodged applications for adoption in the Court on prospective adopters' behalf.[1054] From the evidence, the Committee observes the following.

7.27 The Department became an agency oriented to providing a service to people who wanted to adopt. It worked collaboratively with non-departmental actors to fulfill this function, even before its legislated role expanded.

7.28 The legal requirements for the Department's investigation and reporting on prospective adoptive parents changed over time. The Department's internal policies, which determined who would and would not be considered for adoption, also changed over time.

1052 Child Welfare Department, *Annual Report*, 1939–41.

1053 Child Welfare Department, *Annual Report*, 1947–51.

1054 For example, see: Department for Community Welfare, *A Guide to Services*, 1977, p 4, attached to Department of Communities, email, 7 June 2024; Department for Community Welfare, *Adoption Information and Procedures*, 1978, p 38, attached to Department of Communities, email, 7 June 2024.

7.29 As the number of children available for adoption fell, demand continued. Annual reports show there were consistently not enough children to meet demand from the 1940s onwards. The number of children placed for adoption peaked in WA in 1970, which coincided with some of the major legislative changes taking effect. Subsequently, the Department recorded that the number of children available for adoption had almost halved in the three years leading up to 1975, whereas demand stayed constant. It stated that, 'In 1974 there were four times as many eligible couples as there were children available for placement.'[1055] Overseas adoptions began rising from this time.

7.30 From 1959, the Department reported on all applicants for adoption, including these non-Departmental arranged adoptions. It developed a system for assessing and approving applicants. The Department's Guide to Services in 1977 stated:

> The Department investigates applications from people wishing to adopt children ana if they are satisfactory, approves of the applicants. When children become available for adoption, factors such as their sex, nationality, religion and general suitability are taken into account when placing them with approved couples.
>
> The legal papers (which include the consents of the natural parent or parents of the child), the affidavits, and application of the prospective adopting couple, are drawn up and submitted to a judge of the Family Court. If the order is granted, steps are taken to re-register the child in the name of its adoptive parents.[1056]

7.31 People who wished to adopt a child through the Department contacted the Department and were assessed and placed on a waiting list, or vice versa.[1057] This list was only for adoptions the Department arranged. Other institutions which arranged adoptions, such as Ngala, KEMH, St Anne's, and Hillcrest, managed their own lists and processes for those wishing to adopt. Private medical practitioners and lawyers also matched parties to adoptions.[1058] As described in Chapter 3, the Department's legislative requirements made it faster for people to pursue and arrange adoption privately. In 1964 the Department wait time was 2 years or more, and by 1977 it was 4 years.[1059] Figure 16 compares the numbers of adoptions arranged by the Department as compared to privately.

1055 Department for Community Welfare, *Adoption Information and Procedures*, 1978, p 17, attached to Department of Communities, email, 7 June 2024.

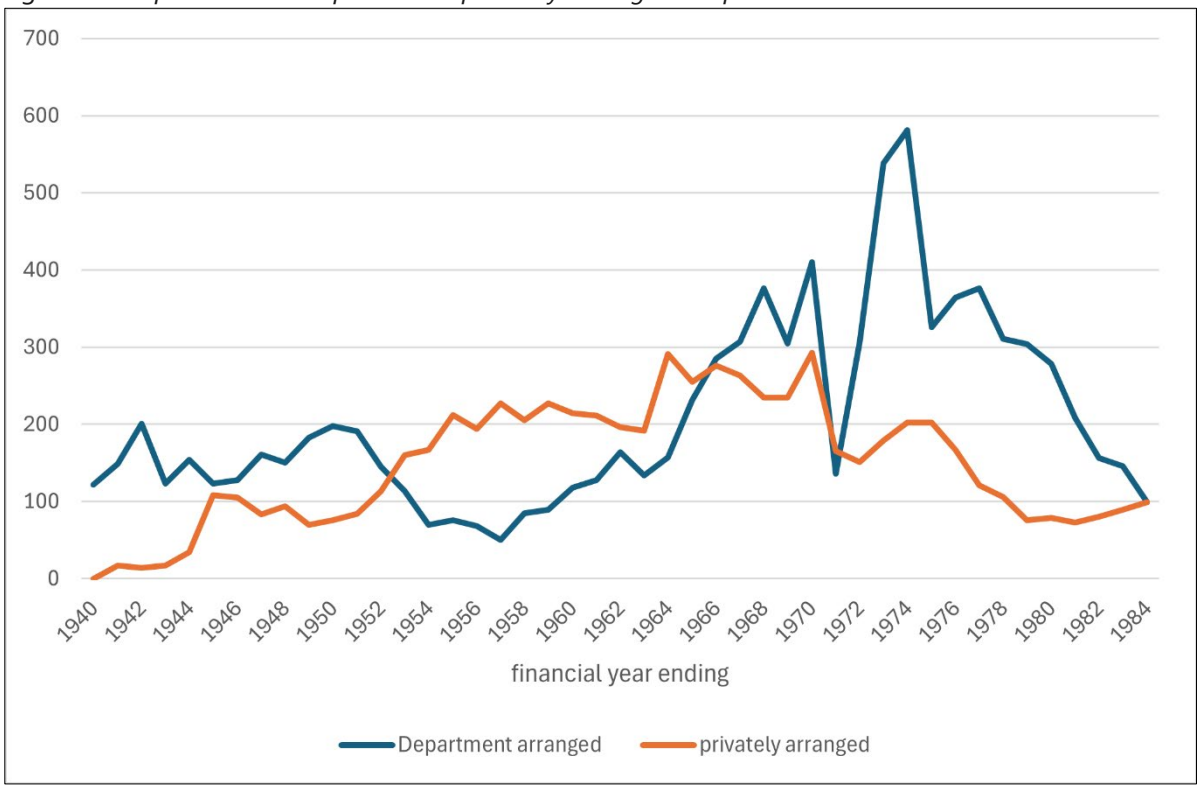
1056 Department for Community Welfare, *A Guide to Services*, 1977, p 4, attached to Department of Communities, email, 7 June 2024.

1057 Legislative Council, *Debates*, 1959, p 2232.

1058 Private medical practitioners and lawyers are considered in Chapter 8.

1059 Department for Community Welfare, *Adoption Information and Procedures*, 1978, p 61, attached to Department of Communities, email, 7 June 2024.

Figure 16. *Departmental adoptions and privately arranged adoptions 1940-1984*



[Sources: Annual reports of Child Welfare Department 1927–1972; Annual reports of Department for Community Welfare 1972–1984]

7.32 In the late 1970s, Department staff accompanied prospective adoptive parents to the hospital to view the newborn baby they may decide to adopt, or had a foster mother bring the child to the Department for the occasion:

> This is a stirring experience and it is a privilege to be present at such a moment. It should be handled with delicate understanding. The hospital staff or the foster mother can be relied upon to praise the baby and discuss all his good points. The prospective parents should be allowed to spend some time alone with the baby and to discuss their feelings. They should each be invited to nurse the child.[1060]

7.33 Department staff were also seen in evidence to engage in regular and courteous correspondence with applicants for adoption to inform them of the progress of their application.[1061]

7.34 The Department was able to arrange extended care for infants until such time prospective adopters collected them.

> There was not the same rush tear and bust to get the baby adopted as there had been to make ready for adoption.
>
> This came with a propensity to ignore proper procedure and if I may be so bold as to suggest it was as if this authority did not want to interfere or place any undue pressure upon adoptive parents.[1062]

[1060] Department for Community Welfare, *Adoption Information and Procedures*, 1978, p 28, attached to Department of Communities, email, 7 June 2024.

[1061] See: Private individual 22, answers to questions on notice.

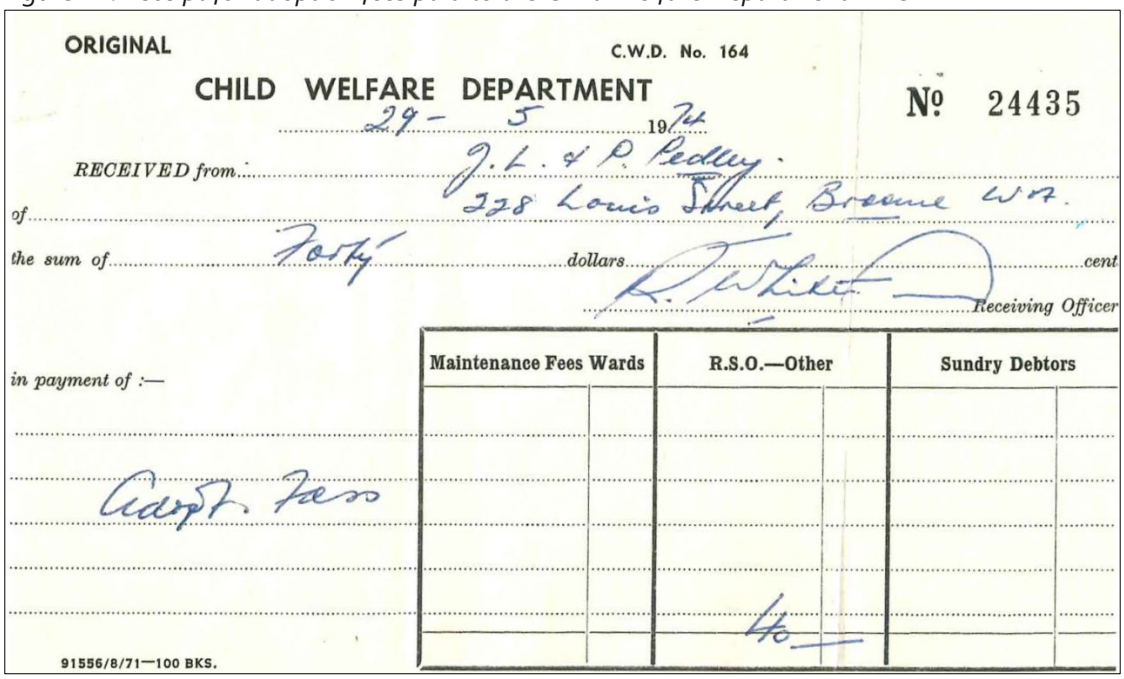
[1062] Submission 98. See also: Submission 124a.

7.35 From a certain point, Department staff visited the homes of prospective adopters after a child was placed with them. However, these visits do not appear to have been very thorough, and the position of staff to make an objective assessment was not ideal given there was a clear motivation for the prospective adopters to make a good impression. Department procedure for 1978 states:

> The social worker tries to visit the home after the placement every five to six weeks and the parents are encouraged to telephone if they have any worries. The social worker's visits are informal and as a rule the officer is received warmly and given a detailed account of the baby's progress.[1063]

7.36 The Department collected fees from adoptive parents for processing their adoption and obtaining extracts of birth reflecting name changes from BDM – see example at Figure 17.

Figure 17. *Receipt for adoption fees paid to the Child Welfare Department in 1974*


ORIGINAL

C.W.D. No. 164

CHILD WELFARE DEPARTMENT

No 24435

29 - 5 19 74

RECEIVED from J. L. & P. Pedley.

of 328 Louis Street, Broome W.A.

the sum of Forty dollars cent

Receiving Officer

in payment of :—

Adopt. Fees

Maintenance Fees Wards		R.S.O.—Other		Sundry Debtors	
		40 —			

91556/8/71—100 BKS.

[Source: A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, pp 151-152, in Submission 112]

7.37 Department staff instructed adopters how to apply to receive the Child Endowment payment in such a way that it would be maximised. This information was not offered to mothers in evidence.[1064]

7.38 In 1978, by the point an application for adoption was filed in Court for a child the Department placed, the adoption of the child was often well-established and any departmental checks and paperwork appear to have become a mere formality:

> After a child has spent seven to eight months in an adoptive home the officer may commence the finalisation of the adoption. The social worker usually makes a final visit to see the baby and the adoptive parents. … The social worker compiles a court report with a recommendation of the parents and a record of the child's progress.[1065]

1063 Department for Community Welfare, *Adoption Information and Procedures*, 1978, p 37, attached to Department of Communities, email, 7 June 2024 (emphasis added).

1064 See: Private individual 22, answers to questions on notice.

1065 Department for Community Welfare, *Adoption Information and Procedures*, 1978, p 37, attached to Department of Communities, email, 7 June 2024 (emphasis added).

7.39 In the Committee's view, the Department held significant responsibility for managing adoptions, which led to pressure for it to meet the increasing demand for adoptions. Several aspects of its role, including its legislated role to report on the suitability of applicants for adoption, were in conflict with this. These roles and responsibilities sat awkwardly with its welfare functions in relation to protecting children and assisting those in need.

7.40 The Department's involvement in adoption often began during a woman's pregnancy, with a meeting between an officer of the Department (or sometimes more than one) and the mother. In some cases, this did not occur, and the mother's first direct contact with the Department was following the birth of her child. In many cases in evidence, there were multiple meetings during an unmarried woman's pregnancy.

7.41 The Department usually had staff visiting each institution or hospital involved in past forced adoption. They were known to the staff at that institution, but in the records seen, were usually employed by the Department. While matters relating purely to health care were dealt with by staff at the hospitals, records indicate the Department took the lead on any issues concerning adoption.

7.42 An officer from the Department usually handled paperwork necessary for an application for adoption, including the signing of consents by mothers. However, in cases of privately arranged adoptions, private solicitors often handled the signing of necessary paperwork by a mother.

FINDING 15

During the 20th century the Child Welfare Department and Department for Community Welfare (now Department of Communities) arranged adoptions, placed children for adoption, obtained and arranged for consent to adoption, and completed paperwork for adoption applications which included reports on adoptive parents and affidavits.

The Department engaged in misconduct and unethical practices

7.43 Conduct by departmental officers was detailed in many submissions. This conduct fell short of what one might reasonably expect from an agency with such a significant role and responsibilities. In many cases, conduct detailed in submissions was improper and unethical. In some cases, it was unlawful. This conduct included:

- meetings with mothers, and their attitudes towards adoption, were misrepresented in records
- consent forms were signed where there was invalid or improperly obtained consent
- mothers were told consent forms were different forms
- consent forms were presented to mothers for signature when they were affected by sedatives and opiates
- coercion and abuse were used to force mothers to 'consent'
- mothers were told their children would be taken into state care if they did not consent to adoption
- children were taken from mothers before consent was given, and were withheld from mothers to obtain consent
- solicitors engaged or employed by the Department were involved in consent processes in ways that were confusing, intimidating, and improper
- mothers were subjected to consistent messaging by officers which undermined their value and supported the adoption of their child

- officers took advantage of young and underage mothers
- fathers, and the families of parents, were subjected to pressure and coercion by officers from the Department
- mothers were not provided with crucial information about support available to them or alternatives to adoption
- crucial information was omitted from an officer's affidavit to the Court
- mothers were discarded and given no support after signing consents for adoption
- there were inadequate checks conducted on the wellbeing of children that had been placed or adopted
- officers from the Department obstructed the process of revoking consent.

7.44 The evidence relied on by the Committee in relation to the paragraphs below is located in Chapters 3, 4 and 6 of this report.

Initial meetings with mothers were misrepresented in records

7.45 As considered within Chapter 4, the first involvement of the Department with many families was its initial meeting with the mother. This often occurred while the mother was pregnant and alone with a social worker. These meetings were brought about in a variety of ways, including:

- the mother attending a Department office
- an officer visiting the mother at home
- an officer visiting the mother at a hospital or institution.

7.46 In some cases, mothers had intentionally made contact with the Department, but in many cases this first meeting was arranged for them, and was not something that they had sought out or pursued.

7.47 In many cases where the Department approached a mother seemingly unprompted, the facts indicate that the Department was likely contacted by the mother's doctor, the hospital where she had antenatal appointments, or the institution where she was staying at the time.[1066]

7.48 A Department officer routinely recorded the first meeting as an initial interview for adoption. Those records routinely stated the mother was seeking adoption for her child, even in circumstances where the officer had been told the opposite.[1067]

7.49 In some cases, mothers reached out to the Department either seeking information about adoption, or support with parenting or preparing for the birth of their child, only to have the matter of adoption raised, before being pulled into the adoption process in an opportunistic and predatory manner.[1068] As considered in paragraph 4.111, a mother attended the Department with her boyfriend to 'find out' about adoption, but came away having signed papers to begin the process.[1069]

7.50 Some mothers did not have this meeting with the Department at all, and first met the officer involved in their matter at a later stage. In many cases, the officer from the Department did

[1066] Submission 104; Submission 37.

[1067] Private individual 23, tabled papers 1.

[1068] Submission 68.

[1069] Submission 70.

not identify themselves to the mother, which created confusion about them and their role in the processes.

Consent forms were signed where there was invalid or improperly obtained consent

7.51 As considered in Chapter 6, many issues were evident in the conduct of officers when they were attempting to have mothers sign consent forms for the adoption of their children. By today's standards, many of the circumstances described by mothers would likely result in the 'consent' being deemed invalid. From 1970 onwards, the Adoption of Children Act also attempted to safeguard against some of these behaviours, by introducing certain circumstances in which a judge as not to grant an order of adoption. These included consent obtained by fraud or duress, or when the person was not in a fit condition to give the consent or did not understand the nature of it.

7.52 Many mothers were clearly in a state of emotional duress at the time of signing consents,[1070] were under the influence of mind-altering medication at the time of signing,[1071] were misled regarding what they were signing or were not able to understand what they were signing,[1072] or were threatened and coerced such that they were not exercising any choice but simply doing what was demanded of them to avoid adverse consequences.[1073]

> To give consent you have to have the capacity, full disclosure to what you are giving consent to and information about choices available. I had none of the above.
>
> - Sue MacDonald, submission 59

Mothers were told consent forms were different forms

7.53 As considered in paragraph 5.101, some mothers explained that a document was presented to them by an officer from the Department as another form but was later revealed to be a consent form. This often occurred in circumstances where the mothers were compromised in other ways; for example, it was shortly after birth, or while they were still under the influence of medications.

7.54 These mothers were misled by the officer from the Department when signing the form. The officer, knowing the circumstances in which the form had been signed, then proceeded to use the form in court proceedings seeking an adoption order.

Consent forms were presented to mothers for signature when they were affected by sedatives and opiates

7.55 Some mothers did not recall signing any consent form, but one was later presented to them with their signature on it. In many cases these mothers believed that the form had been presented to them while they were under the influence of medication, including opiates and sedatives. This experience was only described by mothers who also shared experiences of disorientation, blackouts and returning to consciousness after birth without any recollection or awareness of the birth itself. Paragraph 6.58 considered the evidence of mothers who signed consent under the influence of medication administered to them.

[1070] See paragraph 6.54 and 6.55.

[1071] See paragraph 6.58.

[1072] See paragraphs 6.58, and 6.114 to 6.116.

[1073] See paragraph 6.38 to 6.44.

7.56 In almost all cases, these medications were administered without consultation with the mother, and she became aware of what exactly had been given to her years later when obtaining her medical records.

7.57 Contributors who provided medical records explained that there was no medical reason they were medicated after birth, and questioned whether the medication was administered to facilitate obtaining their consent.

7.58 The Committee is of the view that some mothers were presented with consent forms while under the influence of medication, including sedatives and opiates, which compromised their ability to consider what was occurring or to object to it. Some officers from the Department clearly took advantage of the compromised mental state of these women to obtain their signature on the consent form.

Consent forms were signed in circumstances where it was clear that the mothers did not actually consent to adoption

7.59 Many mothers described signing consent forms in circumstances where it would have been clear to anyone present that they were under emotional duress and that they were not freely giving their consent. Chapter 6 considered evidence of this from multiple contributors. This included taking a prolonged time to sign, crying and being visibly distressed, and yet being told by another person present (their parent or a social worker) that this was their only option or that they had to proceed.

> I was distressed, nothing was read to me, and a copy was never given to me.[1074]

Coercion and abuse were used to force mothers to 'consent'

7.60 As detailed in Chapter 6, officers from the Department also used improper means, including deception, threats, emotional abuse, and pressure to coerce mothers into signing consent forms for the adoption of their children. Mothers described being 'worn down' by their interactions with Department staff until they gave up and gave in, exhausted.[1075]

Mothers were told their children would be taken into state care if they did not consent to adoption

7.61 Multiple contributors referred to threats by the Department to remove their children regardless of whether they consented to an adoption.

7.62 When some mothers refused to consent, the officer from the Department told them that if they did not agree their child would be taken from them anyway and become a ward of the state.[1076]

7.63 This was not an empty threat. At the time, the Department handled adoptions but also wards of the state. It was empowered to apprehend children who appeared to be, or were suspected to be, destitute or neglected, and place them in a home or with another person. The definitions of 'destitute' and 'neglected' children under the *Child Welfare Act 1947* were broad enough that this apprehension was a genuine possibility.

7.64 The manner and timing of officers from the Department telling mothers about their ability to apprehend children was not consistent with any notion that it was done out of concern for a child or with any intention to assist the mother. In multiple cases, mothers opposed to the adoption were ambushed by this threat. It was only ever used as a tool by the officers, often seeming to be a last-resort, to obtain consent. It was also threatened in cases where the

[1074] Submission 73.

[1075] See paragraphs 4.123 and 4.125.

[1076] Submission 59.

mothers had support from their families or their partners to keep their child, including financial support, which meant the child was unlikely to be considered destitute or neglected and the threat was misleading.

7.65 Legal advice was often an expensive privilege only available to the more affluent. Women subjected to these comments were often assumed to be unlikely to afford or pursue their own legal advice regarding their rights. In contrast, Departmental officers had a greater understanding of their obligations under the law. This was evident from comments officers made to different contributors and documents provided to the Committee.[1077] The use of the law and the powers of the Department to intimidate women and coerce mothers into signing documents was an abuse of both power and privilege. It took advantage not only of the power granted through the law, but also the clear vulnerability of people who did not have the same access to legal advice. Misrepresentations were made with the knowledge the mother would be unable to distinguish empty threats from very real ones and therefore subjected to intimidation.

Children were taken from mothers before consent was given, and were withheld from mothers to obtain consent

7.66 Many contributors stated that following or soon after birth, their child was taken, and they were either not invited to see or hold it or were expressly told that they were not permitted to do so. This is considered further in the following section concerning public hospitals.

7.67 Some mothers recalled a Departmental officer taking their child, while others stated it was nurses and medical staff.[1078] The exact procedure appears to have varied.

7.68 Some women were kept in hospital away from their child, and told that when they signed consent they would be able to leave.

7.69 In other cases the child was taken and the mother then discharged without consent given for the child to be adopted.[1079]

7.70 The legal basis used by the Department for holding children away from their mothers, including when their mothers were discharged, is not clear. Legal guardianship of children is considered in Chapter 6 of this report.

7.71 One mother also shared her experience with the Department when she herself was a state ward. She fell pregnant at 17. She was a state ward, but would be 18 (and out of her state wardship) by the time of the birth. She moved in with her sister, who had children of her own. She prepared her home looking forward to the birth of her child.

7.72 Although she was living independently, upon learning of her pregnancy and due date, the Department extended her state wardship until the age of 19. They convinced the mother that this would be for the best, because they could provide her with greater 'support'. This was untrue and no support was provided to her.

7.73 The actual impact of the extension of state wardship was that, when the child was born, the mother was herself a state ward. Her child was adopted against her wishes and without any signed consent form. The legal basis for this was unclear from the provided records. It appeared to the mother that the Department used state wardship to demonstrate she was unfit to care for a child and had consent dispensed with under the provisions of the law at

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[1077] For example, Private individual 7 provided Departmental records which reflected that the Departmental officer had planned in advance for the meeting to take the Mother's consent, which occurred on the very first day that no certification of her 'fitness to consent' would be required.

[1078] See paragraph 4.123 for an example of a Departmental officer. See also paragraphs 5.52 to 5.54; 6.28 to 6.31.

[1079] Submission 143.

that time. This would have amounted to a Departmental construction of circumstances in order to remove a child and have the child adopted against the mother's wishes.

The Department involved solicitors in processes in ways that were confusing, intimidating, and improper

7.74 Where the adoption had been arranged through the Department, there was a pattern of mothers being told by the Department to attend a solicitor in West Perth, or being taken there by an officer of the Department.[1080] The solicitor's role was not usually explained to mothers.[1081] Many attended with the understanding that they would be signing documents, but had not been informed those documents were for the adoption of their child.[1082]

> …6 weeks later I had to go to an office in West Perth, I remember going into a room, a long board table, been scared, alone, ashamed, two man were present, one was [Department officer's name], one I think was a lawyer…[1083]

7.75 It was rare for this to occur with anyone in the room to support the mother. In some cases, parents attended with her, but in all cases where this occurred, they were in support of the adoption. Often, it occurred with only the mother, alone with the solicitor and an officer from the Department.

7.76 The mothers were often young. Social attitudes and respect for authority at the time meant a solicitor and government worker held considerable power and influence while alone in the room with a mother. This power and influence intimidated mothers to sign the paperwork, and was very effective.

7.77 Chapter 8 considers the role of solicitors in past forced adoption.

Mothers were subjected to consistent messaging by officers which undermined their value and supported the adoption of their child

7.78 While experiences varied significantly among contributors, one of the most consistent experiences was that of demeaning and pro-adoption messaging from Departmental officers.[1084] While some mothers received the majority of this messaging from maternity homes (as considered by Chapter 4 and Chapter 7), it was compounded by consistent messaging from officers of the Department. Meetings usually occurred alone between the mother and the Department, sometimes with her parents or the father of the child present, or at an institution such as the hospital or maternity home, sometimes with the Matron present.

7.79 From the earliest stages of involvement in each case, the Department could be seen to begin a process of promoting adoption and undermining a mother's confidence in her own ability to be a mother and raise her child. The exact comments varied, but the underlying principles remained the same. Adoption was repeatedly affirmed as the action a mother should take if she loved and wanted the best for her child. Anything else was 'selfish'.

7.80 At the same time, the mother's self-esteem was progressively eroded through assertions that she would be unable to raise the child herself and was unworthy to do so.[1085]

[1080] Submission 47; Submission 5.

[1081] Submission 5.

[1082] Submission 47; Submission 5; see also paragraph 6.103.

[1083] Submission 5.

[1084] For example, Submission 104.

[1085] Submission 104. See also paragraph 4.131 for the experience of another mother told that keeping her baby would ruin many lives, including the child's.

> the Social Worker was giving her spiel about loving couples giving our babies good homes something that we could not provide.[1086]

7.81 These comments did not occur as part of a broader discussion of adoption and whether it was suitable for a mother in her circumstances. Adoption was the assumed outcome and there was no opinion invited from the mother.[1087]

7.82 This pressure and coercion from the Department often began during pregnancy.

> Coercion in my case took place over a three-month period between entering the hospital system as an outpatient at the Ante-Natal Clinic … to consenting to my daughter's adoption two weeks after her birth…[1088]

> A woman from welfare constantly visited me before the baby was born pressuring me to agree to give her up. I did not agree and didn't want to give my baby away![1089]

> At six months' pregnant we went to sign some paperwork. I asked the welfare lady what would happen if I changed my mind after the birth. Could I get any help? She said no. What could you possibly offer this child? You are in your second-year apprenticeship and you have no money. The couple we have lined up for your child own a house and have $3000 in the bank.[1090]

> As I remember it, the unvarying narrative from my allocated social worker went something like this: If you place your child for adoption it would make a married couple very happy, because they are unable to have children. Reassuring me I could have my own children if I wanted them later on. It was not hard to get me to believe that adoption was the answer - pictures of an eager couple ready to give my child all the things I was told were important – respectability, two parents, and financial security. Should I decide to keep my baby - a lifetime of difficulties raising a child unsupported, the stigma of my child being illegitimate, a diminished social life and no potential in future marriage stakes.[1091]

7.83 The meetings and discussions were often repetitive.

> I did as I was told, and was getting it drummed into me on a regular basis that it was "For the best, for the best, for the best".[1092]

> If I kept my baby, then I would ruin everyone's life. If I loved my baby, I would give them up. So, if I kept my baby, I did not love them. This was said to me over and over again by social workers at the Department and the hospital.[1093]

7.84 In many cases the meetings continued until a mother agreed to adoption.[1094]

> I changed my mind a few times and each time I did … one of the social workers, would come out and see me at my home, and I would get the same spiel again.[1095]

1086 Submission 104.

1087 Private individual 26, transcript of evidence. See the case study for this mother following paragraph 4.132.

1088 Submission 124a.

1089 Submission 18.

1090 Private individual 21, tabled paper 1.

1091 Submission 124a.

1092 Private individual 16, transcript of evidence.

1093 Submission 70.

1094 Private individual 26, transcript of evidence. See the case study for this mother following paragraph 4.132.

1095 Submission 70.

7.85 The repetition of these messages had a significant impact on mothers. By the time they came to the written consent to adoption, many mothers had internalised the Department's messaging – see examples at paragraph 6.115. These mothers believed adoption was a sign of love for their child and that it would be wrong and selfish to attempt to raise a child themselves. They signed their consent on that basis.

7.86 The Committee noted that some contributors had these meetings described to them as 'counselling'.[1096] This label is misleading to mothers and to those wishing to understand forced adoption practices. Nothing at the meetings could reasonably be described as counselling. There was no support provided to mothers, and there was no concern for their wellbeing.

> At no point did she ask if I was feeling OK, or if I had any doubts.[1097]

7.87 The clear purpose of these meetings was to create an opportunity for a Departmental officer to speak to mothers about adoption, and to convince each mother to agree to adoption. Once that agreement was secured, the purpose had been fulfilled and the meetings ceased.

Officers took advantage of young and underage mothers

7.88 Officers from the Child Welfare Department also took advantage of young and underage mothers by having important discussions with them while they were alone and unsupported.

7.89 As considered in Chapter 3, procedural rules were introduced to require 'supporting affidavits' for mothers under the age of 21, in clear recognition of the impact that their age might have of their understanding of adoption and their capacity to give proper consent.

7.90 As considered in paragraph 6.60 onwards, many mothers who contributed to this inquiry were under the age of 21, 18, and even 16 at the time of their experiences.[1098]

7.91 They were commonly alone during medical procedures including the birth of their children. On almost every occasion Departmental officers spoke to mothers about adoption, these conversations took place alone and without the support of a parent, legal guardian or support person.

> Once a vulnerable mother was identified as a potential bearer of a child for adoption, there was nothing in place to protect her. In the time all interactions took place I was a minor. … For the girl who was naïve like I was this signalled easy prey for the unethical operators. … The State had a duty to protect people from violation as happened … This also should have been in place at the department tasked with child welfare.[1099]

Fathers, and the families of parents, were subjected to pressure and coercion by officers from the Department

7.92 Some mothers had support from their families, the father of their child, or both. Multiple contributors were in contact with the fathers of their children while pregnant. In some cases the fathers were supportive of them keeping the child. One father was threatened with prosecution for carnal knowledge if he did not consent to the adoption.[1100]

[1096] Department for Community Welfare, *Annual Report,* 1973, attached to Department of Communities, Submission 106; Department for Community Welfare, *Administrative Instruction No 289*, date unknown, attached to Department of Communities, Submission 106.

[1097] Submission 124a.

[1098] See paragraphs 6.60 to 6.75 regarding the ages of mothers when signing consent.

[1099] Submission 98.

[1100] Submission 59.

7.93 Where one mother's parents opposed adoption and supported her keeping the child, officers from the Department attempted to break down this supportive relationship to obtain agreement to adoption.

> [The social worker] told my parents that it was selfish of them to make me keep the baby due to my age. My mother said then that she would care and look after the baby until I was able to do so. [The social worker] told them that if they did this, they would ruin my life and the baby's.[1101]

7.94 Paragraph 6.77 onwards considers the evidence of other mothers regarding the Department's approach to their family.

7.95 In the example at paragraph 4.126, one 16-year-old mother's parents supported her keeping the child, and were themselves threatened with having her taken from them.[1102]

7.96 When threats were made to a mother's family or to the father of a child, these could usually be traced back to the involvement of the Department.

Mothers were not provided with crucial information about support available to them or alternatives to adoption

7.97 Another similarity between the experiences of almost all mothers was the lack of information and alternatives provided to them by officers of the Department.

7.98 This section has considered the denigration and repetition used by officers when attempting to persuade mothers to agree to the adoption. This behaviour was accompanied by a lack of any discussion of alternatives or possible supports that could be accessed by mothers. In some cases, mothers were provided with misinformation about these. This lack of information, and misinformation, formed part of the coercion, deception by omission, and emotional abuse used against mothers to force them into the desired outcome of agreeing to the adoption. Paragraphs 4.38 to 4.46 to further considered the evidence relating to information about support and alternatives.

7.99 The lack of information for mothers about alternatives and supports, together with the repeated assertions that they could not raise a child and it would be better adopted, led to an implication that there was no alternative and no supports available to them.[1103]

7.100 Even when mothers had the courage to ask, Child Welfare Department officers misinformed them to believe no support was available.[1104]

7.101 Many mothers, and adopted people, found out after the adoption that alternatives and support were available.[1105]

7.102 Many discussions of past forced adoption comment upon the financial benefits, or lack thereof, available to unmarried mothers during different periods. However, the evidence indicates that even when financial benefits were available to these mothers, they were not told and should have been. This is consistent with the broader view of this Committee that interactions between some officers of the Department and unmarried mothers were motivated by the intention to secure a successful adoption. Informing a mother of financial benefits did not serve this purpose. From the perspective of the Departmental officers, this information was irrelevant at best. At worst, it would result in a mother building confidence

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[1101] Submission 70.

[1102] Submission 59.

[1103] Submission 124a; Submission 70. See also paragraphs 4.139, 4.140, and 4.142 to 4.146.

[1104] Submission 70. See also paragraph 4.146.

[1105] Submission 124a; Submission 119; Private individual 21, transcript of evidence. See also paragraphs 4.55, 4.144, and 4.145.

that she could raise her child, thus becoming more opposed to the adoption. This would make it more difficult for officers to progress the adoption.

7.103 Even mothers who sought support were funnelled into the processes of obtaining an adoption, rather than being provided with the support that they were seeking.

When laws were passed to protect mothers, practices did not change to reflect the underlying priorities

7.104 As noted above, in 1964 amendments introduced a requirement that consent not be taken from mothers within 7 days of giving birth. This came into effect in 1970. An exception was permitted where a medical practitioner or midwife signed off that the mother was fit to give consent. The clear intention behind the amendments was that the usual process would see consents given only outside this 7-day window, aside from exceptional cases.

7.105 Departmental officers adapted fluidly to new processes arising from the 1970 changes. As considered within paragraph 6.52, some mothers who gave birth in or after 1970 still signed consent forms within 7 days of giving birth. The only evident process change was that, after 1970, the necessary certification of fitness to consent accompanied the consent form.

7.106 The continuing use of consents taken within 7 days of birth following the changes in 1970 was in direct conflict with the intention of the law that had been passed.

7.107 Certifications that mothers were 'fit' to give consent were seen on adoption records where the mother would have been noticeably unfit to give consent. While the signatures on these forms were from medical staff, it appears that the responsibility for presenting the forms for their signature fell on officers from the Department.

An officer of the Department omitted crucial information from court documents

7.108 The Department's conduct was not limited to mothers. One contributor provided documents which suggest an officer from the Department omitted crucial information from documents supporting an adoption application.[1106]

7.109 The role of the courts in past adoption is considered later in this chapter. For the purpose of this issue, it is important to understand that most adoption applications were dealt with in chambers and on the papers. This means there was no hearing held, and the only information available to the Court was within the documents filed. Adoptive parents usually filed those documents and the Department prepared many of them.

7.110 One mother signed a consent form, but due to her age the rules at the time required the child's grandmother (who lived interstate) to provide supporting consent. The officer from the Department spoke to the grandmother by telephone, and the grandmother informed her that she opposed the adoption and supported her daughter keeping the child. She refused to sign an affidavit supporting the adoption. She was also open to caring for the child herself.[1107]

7.111 The officer prepared an affidavit in support of an adoption, in the absence of an affidavit by the grandmother. The officer:

- noted the mother had not yet returned home interstate, and was unsure when she might do so
- sought the dispensation of the grandmother's supporting consent

[1106] Submission 73.

[1107] Submission 73.

- omitted their telephone discussion with the grandmother, and the grandmother's clear position opposing adoption.[1108]

7.112 An unknowing reader would assume that the officer had not spoken to the grandmother at all, and that perhaps the grandmother had no interest in the mother's state or the child's adoption.

7.113 The broader conduct of the officers from the Department described within this section also involved degrees of dishonesty in connection with adoption applications. It was improper in many cases for officers from the Department to supply signed consent forms for use in applications for adoption, knowing the circumstances in which they had been signed, as set out in Chapter 6. It was also improper for them to prepare affidavits in support of applications that omitted relevant facts.

Mothers were given no support after signing consents for adoption

7.114 Once their child had been taken and any necessary forms signed, the involvement of the Department with mothers ended abruptly. Mothers did not receive any follow ups from the Department, any check ins, or any information regarding their child.

> There was no scheduled follow up … to check on my health and welfare once I had served my purpose, and I remember feeling dead inside.[1109]

There were inadequate checks conducted on the wellbeing of children that had been placed or adopted

7.115 At certain periods Department procedure involved conducting checks on children placed for adoption. However, even where conducted, these checks were clearly inadequate to ensure the welfare of the children. Multiple contributors shared that they had been treated poorly or subjected to abuse and nothing was done.[1110]

7.116 Other evidence revealed no Departmental checks at all. One adopted person said:

> I have been verbally advised by … the Department of Communities that an officer visited the home of my adoptive parents prior to my birth, but there is no record of any visit after I was placed with them.[1111]

7.117 Many contributors shared experiences and records of poor treatment and abuse following their placement. In some, but not all, cases, visits by the Department to ensure the wellbeing of the children would have assisted in identifying this and prevented it continuing.

7.118 According to the Department's internal documents, the prescribed process for assessing prospective adoptive parents and checking the welfare of children placed did not vary depending on the conditions in which the child had been made available for adoption.[1112] This means that, from the point the Department was required to vet all prospective adoptive parents, adopted children's chances of a happy childhood or otherwise were theoretically unrelated to whether they were born outside of marriage or had been separated from their mother against her will.

[1108] Private individual 73, tabled paper 1.

[1109] Submission 124a.

[1110] Submission 17; Submission 152.

[1111] Private individual 22, answers to questions on notice.

[1112] Department for Community Welfare, *Adoption Information and Procedures,* 1978, attached to Department of Communities, email, 7 June 2024.

FINDING 16

The Child Welfare Department and Department for Community Welfare (now Department of Communities) did not routinely check the wellbeing of children placed for adoption.

Officers from the Department obstructed the process of revoking consent

7.119 As considered in paragraphs 6.84 ,6.125, and 6.129, many contributors said Department officers did not speak to them about their ability to revoke consent or the process of revocation. Some mothers specifically asked about changing their mind and other options, but were told there were no other options.

7.120 Some mothers spoke to the solicitor handling consent with the officer from the Department present. One mother was told that there was a fee for her to pay, which the officer from the Department then stated he would pay.[1113] Solicitors informed some contributors that if they sought to revoke their consent they would be in trouble. It was improper for a solicitor engaged by the Department to provide any advice to a mother. The mother was not their client and there was a clear conflict of interest. Departmental officers oversaw this process.

7.121 At a certain point, it is evident that the Adoption Rules required mothers to be provided with certain documents when signing the consent form, including a revocation form. It is clear that this was introduced as a requirement because prior to this, there was never information or a form provided to mothers. After this was introduced, many contributors mention being provided with an envelope containing the revocation form. However, some contributors were still not provided with these documents.

7.122 As described in Chapter 6, one mother in evidence attempted to revoke her consent in 1980, without success.

7.123 Prior to the 30-day revocation period being imposed in 1970, in theory consent could be revoked at any time before an order of adoption was made. Both before and after the introduction of the revocation period, contributors stated they contacted the Department and asked for their child to be returned to them. Instead of treating this as a desire to revoke consent and explaining how to do so, they were refused, treated as an inconvenience, often given the impression that it was too late or nothing could be done.

FINDING 17

Some officers of the Child Welfare Department and Department for Community Welfare (now Department of Communities) engaged in unethical, improper, and in some cases potentially unlawful conduct with impunity.

Department staff engaged in practices that were at odds with its approved adoption procedures and wider departmental duties

7.124 Department annual reports, internal policies, procedure manuals and instructions to staff document its attitude to adoption over time, strategies for handling rapidly increasing demand for adoptions, and shifts in approaches to managing the adoption process as adoption legislation evolved.[1114] The evidence for this inquiry brings the discrepancy between sanctioned and actual practices into sharp relief.

[1113] Submission 5. See also paragraph 6.103.

[1114] Department for Community Development, *ROADS: An index to locations and access to adoption records*, 2004; Department for Community Welfare, *Adoption Information and Procedures*, 1978, attached to Department of Communities, email, 7 June 2024; WA Government, *Information on illegitimacy*, 1972 (Appendix 6); Submission 106 (Department of Communities).

7.125 For example, in contradiction to the lived experience evidence on coercion to adopt, a 1972 Government publication on illegitimacy states:

> If the girl's mother is unwilling to have her baby adopted, and the parents or anyone else pressure her to agree, this pressure is a breach of the law and they are liable to a stiff penalty. … what the Child Welfare Department sees as the most important thing in this matter is that pressure should be removed.
>
> …
>
> The Department becomes involved when the girl is referred to it by the hospital or doctor. … there are several hospitals which are specially co-operative and give counselling. … Whether with a social worker at the hospital or Child Welfare Department, counselling is most necessary so all facts about adoption must be presented to the young mother for consideration. … If the mother prefers to have the baby adopted, the Child Welfare Department's attitude is that the decision must be hers alone and the Department does not want to persuade her either way but is anxious to ensure that all the facts are made known to her. It is the Department's function to help her if she asks for help.[1115]

7.126 This publication, together with comments seen in Hansard considered in Chapter 3, indicates that the broader understanding of the Department's practices, and the way it presented those practices, did not accord with what was taking place.

7.127 The Department's own information generally portrays it as a responsible agency striving to develop and implement well-informed and consistent practices for handling adoption.

7.128 It is possible that many adoptions were well-managed and many staff were professional, accountable and courteous. However, the inquiry neither invited nor received that evidence.

7.129 The difference between Departmental records about procedures and the lived experience evidence records gathered by this inquiry makes clear that:

- some Department officers were not acting in accordance with the procedures developed and sanctioned by the Department
- the same, and some senior, staff engaged in misconduct over extended periods of time
- there was a lack of oversight of staff conduct, or an inadequate response, by senior managers within the Department
- the mismatch between supply of children and demand for adoptions created conditions for improper and unethical practices to emerge[1116]
- the development of the law facilitated increased adoptions, but struggled to keep pace with emerging practices and potential issues, and left aspects unattended
- this reactive situation was exploited by some staff within the Department who did not adapt their practice to new requirements, and whose continued misconduct went unchecked.

[1115] WA Government, *Information on illegitimacy*, 1972 (Appendix 6). A disconnect was also observed in relation to the assistance available to unmarried mothers (see: Private individual 22, question on notice; Submission 106 attachment 2; Department for Community Welfare, *Administrative Instruction No. 105*, 1976, attached to Department of Communities, email, 7 June 2024; Department for Community Welfare, *A Guide to Services,* 1977 and Department for Community Welfare, *Adoption Information and Procedures*, 1978, both attached to Department of Communities, email, 7 June 2024.

[1116] See also consideration of pressure placed on social workers in connection with adoption in Victoria, in: Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, p 37.

Departmental staff omitted details about their interactions from their records

7.130 Many aspects of the interactions Departmental officers had with mothers, fathers, and their families were not reflected in the records they kept. While in relation to some details this could be because it was seen as irrelevant, in many cases it appears that officers omitted this information from their records.

7.131 Common conduct that was notably absent from official records included:

- ignoring mothers' express wishes to keep their babies
- the removal of babies from their mothers following birth, and the withholding of those babies from their mothers
- threats to mothers that if they did not consent to adoption, their child would be taken into state care regardless
- contact with mothers wishing to revoke their consent
- suggestions to family members to threaten fathers, and directly threatening fathers and family members
- telling mothers they could leave the hospital or hold their baby once consent was signed.

7.132 The routine omission of the above information, together with the above example of an officer omitting crucial information in documents to the the court, indicates that some officers from the Department were aware that at least some aspects of their conduct were wrong or would be viewed poorly by others within the adoption system.

FINDING 18

Some officers of the Child Welfare Department and Department for Community Welfare (now Department of Communities) omitted details from official Departmental records about their interactions with mothers, fathers, and their families in relation to adoption.

Misconduct by the Department was systemic

7.133 The conduct of staff from the Department did not occur in isolated incidents. Misconduct was seen at all stages of the Department's involvement in adoption matters. Misconduct was also seen from various individuals, although certain individuals from the Department featured in the experiences of more than one contributor. There were no records suggesting that these individuals were reprimanded for their behaviour. Instead, one such individual was later celebrated for her contributions to the field.

7.134 The conduct of Departmental officers also occurred when non-Departmental staff were present, such as medical staff or the staff of institutions.[1117] This demonstrated a boldness by Departmental staff, and a degree of confidence that they would not be questioned or punished for their behaviour.

7.135 The nature of records and experiences available to the Committee makes it difficult to determine how widely the misconduct by officers was known. The methods used were certainly evident to those who witnessed them, including staff at hospitals, institutions for mothers, and many solicitors involved in adoptions. However, as noted above, the records

[1117] For example: Submission 23; Submission 76; Submission 98; Submission 104; Submission 70; Submission 72.

kept by officers routinely omitted crucial information about the specifics of their work and the processes used by them to obtain consent. It is not clear whether superior officers condoned the conduct, or were unaware of it because it was omitted from records.

> If I had been treated according to this publication and the procedures outlined had been adhered to, I never would have had my daughter taken from me the moment she was born.
>
> - Sue MacDonald, submission 59

7.136 In multiple specific instances, the conduct of Departmental officers was at odds with the law and policy guiding the Department, and broader adoption, at the time. Hansard reveals a very different understanding by law makers about how adoptions were being processed, particularly the matter of consent.

7.137 The practices of officers from the Department were systemic. Their priorities and the ways in which it allowed officers to operate created a system in which it was not only possible but likely that some officers would adopt an 'ends justify the means' approach which prioritised successful adoption orders above all else. Departmental officers were given power and responsibility. There was no evidence of meaningful oversight or accountability of these officers. This may have allowed improper practices to occur.

7.138 Departmental officers were also responsible for setting the expectations for conduct and attitude among their juniors and non-departmental staff at hospitals and institutions. Where they engaged in improper conduct, this was represented to others as acceptable and that they could do the same.

FINDING 19

Unethical, improper and potentially unlawful practices within the Child Welfare Department and Department for Community Welfare (now Department of Communities) were systemic.

FINDING 20

Officers of the Child Welfare Department and Department for Community Welfare (now Department of Communities) worked off-site in institutions and hospitals. Their conduct and attitudes informed and influenced staff employed in those settings.

Department of Health

7.139 From 1911 to 1984 the Department of Health operated under the title of the Public Health Department of Western Australia.

The Public Health Department managed public health services which included hospitals involved in past forced adoption

7.140 The Public Health Department was a government agency that managed the public health and medical services in Western Australia. This included the management of KEMH, and other public hospitals.

7.141 At the start of the 20th century, mothers frequently gave birth at home or went to group homes for 'confinement' and birth. This meant that early birth, and adoption, often proceeded without the involvement of public hospitals. However, over the course of the century, it became preferable (and later, expected) to give birth under the care of medical staff at a hospital. This meant that public hospitals became more involved in births, and consequently in adoption.

7.142 Public hospitals were seen to work with other parts of the adoption process in three broad categories. All public hospitals worked with the Child Welfare Department and later Department for Community Welfare (CWD/DCW) to facilitate the adoption of babies birthed in their care. All public hospitals seen in the inquiry also worked with solicitors or doctors who had organised adoptions privately, rather than through CWD/DCW. Finally, certain public hospitals developed a collaborative working relationship with institutions for unmarried mothers that arranged adoptions, and also facilitated adoptions through their own processes.

7.143 Non-government institutions like Ngala, Hillcrest, and St Anne's had previously handled births and had unmarried mothers remain with them throughout the adoption process. However, as described above, births then moved to hospitals. Some institutions resolved this by setting up their own maternity hospitals and private hospitals. Others, such as Ngala, began to send mothers to a public hospital for birth, and routinely had them return after birth.

7.144 KEMH was the most frequently mentioned public hospital in evidence. This hospital maintained its own list of persons wishing to adopt.[1118] The Committee formed the view from the evidence that KEMH arranged adoptions directly with adoptive parents (and through their lawyers).[1119]

FINDING 21

Some public hospitals including King Edward Memorial Hospital arranged adoptions in the 20th century.

7.145 KEMH also worked with Ngala to accommodate mothers for birth. The babies of those mothers were born at KEMH, but Ngala arranged their adoptions. They were often returned to Ngala not long after the birth, before being placed with their adoptive parents.[1120]

> It was not unusual for KEMH and/or the various institutions to fight over who owned the baby when a mother had been taken to KEMH to give birth. Nobody ever asked the mother what she wanted and needed.[1121]

7.146 As explained in paragraph 5.97, KEMH operated the 'Kensington Annexe' from 1957 onwards. This was a separate building to the hospital itself but was located nearby. Unmarried mothers and/or their babies were often moved to the Kensington Annexe following birth, although the exact practices varied over time.

7.147 Contributors also shared experiences at other metropolitan public hospitals,[1122] and regional hospitals.[1123] Births at these hospitals were far less common among submissions than those at KEMH. While this likely indicates that there were less adoptions conducted through those hospitals than through KEMH, the lack of submissions is also likely tied to the availability of records. Where other public hospitals were involved in adoptions, the adoptions were often

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1118 Dr S Bowen, Chief Executive, North Metropolitan Health Service, transcript of evidence, Legislative Council, 9 October 2023, p 2, and answers on notice.

1119 See also C McMeekin, *Raising Ngala*, Ngala, 2021, p 79; J Lang, *The Open Door: A history of loving care for families*, Ngala Mothercraft Home & Training Centre Inc., 1980, p 46.

1120 For example, Submission 103.

1121 Private individual 14, transcript of evidence.

1122 Including Osborne Park Hospital, Devonleigh Maternity Home, Armadale-Kelmscott District Memorial Hospital, and Mount Hospital (for treatment following birth). See: Submission 109; Submission 59; Submission 37; Submission 68.

1123 Including Broome Regional Hospital, Geraldton Regional Hospital, Carnarvon Hospital, and other unidentified regional hospitals. See: Submission 148; Submission 119; Submission 29; Submission 18.

arranged privately between the mother or her family, doctor, and solicitors. These 'private' instances of forced adoption have seen the most significant fragmentation and loss of records. Those affected by forced adoption at smaller public hospitals are therefore likely to encounter much greater difficulty obtaining records, which may have affected their understanding of the circumstances surrounding their experiences, as well as their ability and willingness to contribute to this inquiry.

Social workers may have been hospital staff

7.148 The section of this report considering the role of CWD/DCW in forced adoption considered the actions of social workers on the basis that social workers were ordinarily employed as officers of CWD/DCW (and often with different titles which did not appear well understood by contributors). However, it is important to note that social workers, or almoners, were sometimes employed by public hospitals.

7.149 The Department of Health stated that social workers were directly employed by KEMH from 1920 to 1980. Social workers also first appear in the listings for the Public Health Department in 1976.[1124]

7.150 It is therefore difficult to determine whether the social workers referred to by contributors were officers of CWD/DCW or the Public Health Department. This is made more difficult because those officers often did not introduce themselves fully to mothers, and on some occasions were described as social workers when they held a position with a different title within a state government department. One mother stated:

> I would describe the actions of those responsible as negligent, in that the hospital social worker failed by omission to make me aware of a viable alternative solution to adoption. I was a vulnerable pregnant young woman in need of help and protection and I would describe the hospital's failure to act on my behalf as discriminatory. They failed by omission to provide me with the same care and legal protection afforded to married mothers and babies in the hospital.[1125]

Conduct of staff at public hospitals

7.151 Staff at public hospitals, including nurses and doctors, engaged in behaviour in connection with forced adoption which would be considered unethical by today's standards. This conduct included:

- bringing unmarried mothers to the attention of CWD/DCW
- marking medical records of unmarried mothers to indicate that their baby would be adopted
- treating unmarried mothers with less consideration than other mothers
- taking and withholding the babies of unmarried mothers from them at birth
- giving babies of unmarried mothers names in nurseries that differed from the names given to them by their mothers
- failing to inform mothers of their newborn children's whereabouts, not telling them when asked, moving children without their mother's knowledge or consent, lying to them about the location of their children, and denying them access to their newborn children
- witnessing misconduct by officers from CWD/DCW and not intervening

[1124] Western Australia, *Government Gazette*, No 61, 21 October 1976, 3717-954.

[1125] Submission 124a.

- witnessing misconduct by staff from other institutions and not intervening
- not providing unmarried mothers with any information or post-natal care
- failing to provide relevant medical information concerning infants when they were transported out of their care.

7.152 The Committee notes that no code of ethics was available for nurses during the period of the inquiry. The first Code of Ethics for Nurses in Australia was developed in 1993.[1126]

7.153 As examined from paragraph 5.78, some staff occasionally deviated from the usual procedure in acts of kindness to mothers.

FINDING 22

The Public Health Department (now Department of Health) played an active and substantial role in past forced adoption.

Unmarried mothers were brought to the attention of the Department

7.154 Some contributors shared experiences of having no contact with CWD/DCW until they attended a hospital as an outpatient for antenatal care. Those contributors were then contacted by or had appointments scheduled with CWD/DCW. In those cases, CWD/DCW had clearly been provided with details about them and their pregnancy by the hospital. This Committee has formed the view that there was a policy in place for CWD/DCW to be informed of pregnant women who were unmarried.

7.155 No consent had been given by those mothers for their details to be provided to an external department. This information appears to have been provided in accordance with internal policy and perhaps a belief that it was in the interest of the unborn child, because CWD/DCW handled the welfare of children.

7.156 In some cases, adoptive parents were informed of a child for their adoption either immediately following the birth, during the birth itself or even prior.[1127]

FINDING 23

Staff at public hospitals brought unmarried mothers to the attention of the Child Welfare Department and the Department for Community Welfare.

Medical records for unmarried mothers were marked to indicate their baby would be adopted

7.157 Records maintained by hospitals for unmarried mothers and their children often had indicators to distinguish them.

7.158 As considered in paragraph 5.12, some contributors provided their medical records, which were marked with a triangle or a triangle around an 'A' (for adoption),[1128] or simply an 'A'. Others had records marked 'Adoption',[1129] 'to be adopted', 'for adoption', or 'baby for adoption'. Other records contained markings which could indicate a notation of marital

[1126] M Johnstone, 'Key milestones in the operationalisation of professional nursing ethics in Australia: a brief historical overview', *Australian Journal of Advanced Nursing*, 2016, 33 (4):35-45.

[1127] See paragraph 5.9 and 5.10.

[1128] Submission 110; Private individual 22, transcript of evidence.

[1129] Submission 81.

status, such as 'U/M'.[1130] Some cots containing the newly born babies of unmarried mothers were also marked with a triangle, indicating adoption.[1131]

7.159 These markings were seen on records created before a mother's agreement to adoption, before signing of consents for adoption, and in some cases before she had even met with an officer from CWD/DCW.

7.160 The markings reinforced the distinction between unmarried mothers and their children from other patients, and the assumption that all children of unmarried mothers could and would be adopted.

7.161 When asked in a hearing, Dr Shirley Bowen, Chief Executive of the North Metropolitan Health Service, was not aware of any practices related to marks indicating adoption.[1132]

FINDING 24

Staff at public hospitals marked the records of unmarried mothers and their children with symbols. This shorthand indicated that the mother was unmarried and her child was to be adopted.

Unmarried mothers were given less considerate treatment than other mothers

7.162 Many contributors shared the view that the standard of care and the manner of treatment of them as unmarried mothers differed significantly from that of married mothers. Unmarried mothers described being treated more poorly than married mothers.[1133] This difference was evident from experiences shared by contributors, but was most notable in a submission from a mother whose (married) sister had during birth, and who had further children in the years that followed her first child being taken from her (see paragraph 5.46).[1134]

FINDING 25

Some staff at public hospitals routinely treated unmarried mothers with less care than other patients.

7.163 While a small number of contributors did not express concerns at their treatment by hospital staff,[1135] or shared experiences of kindness from certain staff members as considered in paragraphs 5.83 and 5.144, most recalled poor treatment. One of the most widely reported aspects of this was the poor attitude with which they were treated by staff, which varied from silent contempt to outright insults.[1136] The experience of not being spoken to at all by doctors and nurses was common.[1137]

7.164 Many mothers shared a feeling of shame from the treatment they received. In some cases this was open and intended to mock them and their circumstances.

1130 Private individual 23, tabled paper 1.

1131 Private individual 16, transcript of evidence.

1132 Dr S Bowen, Chief Executive, North Metropolitan Health Service, transcript of evidence, Legislative Council, 9 October 2023.

1133 Submission 113; Private individual 19, transcript of evidence. See also: paragraph 5.46.

1134 Submission 59.

1135 Private individual 26, transcript of evidence.

1136 Private individual 7, transcript of evidence; Submission 60; Private individual 16, transcript of evidence; Submission 14; Submission 23; Submission 48; Submission 59; Submission 67; Submission 150; Submission 124a.

1137 Submission 50.

> The Nursing Sister on duty took delight in calling loudly for me as "Miss [Name]" for all the other patients to hear. [1138]

7.165 Others experienced direct denigration from staff in private, using rude and obscene language to refer to them.[1139]

7.166 As noted above, in some cases, mothers recalled being referred to as 'triangles', in clear reference to the triangles seen on their records indicating they were unmarried and it was assumed that their child would be adopted.[1140]

7.167 Many mothers shared that they had been told nothing about the birth process, and entered into that process without any preparation or understanding.

> The whole experience at KEMH was actually horrifying. Primarily as I was by myself and had no idea of the process…[1141]

7.168 Although nothing had been explained to these mothers, they were often treated with a degree of impatience and frustration from nurses for that lack of knowledge.[1142]

7.169 As set out in paragraphs 5.11, 5.37 and 5.38, many mothers recalled being left alone, unattended, and ignored during labour and when they needed care.

FINDING 26

Staff at public hospitals left unmarried mothers unattended when they required medical assistance.

7.170 Many mothers were given medication, including sedatives, opiates, and antipsychotics.[1143] These were administered without their knowledge or consent, or without medical necessity.[1144] The administration of these drugs caused many contributors to suffer 'blackouts' and memory loss of major events in their pregnancy and the birth of their child. Paragraphs 5.11, 5.34 and 5.35 shared the evidence of mothers administered drugs.

7.171 A small number of contributors also had their pregnancy induced, without their knowledge or consent, and without medical necessity. In one case, drugs were administered to induce a mother's pregnancy. She was then sent home unaware of this, but records indicated that the Department for Community Welfare was notified, so that the Department officer could ensure they were present at the birth.

FINDING 27

Staff at public hospitals administered medication to unmarried mothers without their knowledge or consent, or without medical necessity. This included sedatives and opiates, antipsychotic medications, drugs to prevent lactation, and drugs to induce labour.

7.172 Multiple mothers recalled being used for the training and education of interns without warning or explanation, as described in paragraphs 4.79 and 5.40.

1138 Submission 37.

1139 Examples of this included 'disgusting', and 'sluts'. See also Submission 103.

1140 Submission 98.

1141 Submission 94.

1142 Submission 109.

1143 Submission 103; Private individual 22, transcript of evidence; Submission 13; Submission 37.

1144 Paragraphs 7.55 to 7.58 consider this in connection with signing consent to adoption.

FINDING 28

Unmarried mothers in WA public hospitals were used for the training of medical students without their consent and without regard for their privacy or dignity.

7.173 Almost all contributors went through the birth alone, without the presence of any support or family members. Some contributors requested their mothers, only to be refused.[1145] One contributor was driven to the hospital by her brother, who was left in the waiting room.[1146] Another contributor's mother was told by the hospital that she was sedated, asleep, and so she should not come.[1147]

7.174 The treatment that mothers received in hospitals played an important part in the broader coercion of mothers. It broke their spirits and reinforced the idea that the mother was unworthy of care or attention.

> I had just been through a process in the hospital which created such a deep profound belief that I was a nothing, less than human, a body that created a baby for some one else. I had no sense or thought of entitlement to my own child.[1148]

7.175 The attitude towards mothers by medical staff also had medical impacts. One contributor recalls suffering an infection because proper sterile procedures were not used when putting in an IV.[1149] Another contributor suspects that they suffered an infection after birth because they were not cleaned properly by nurses.[1150] Paragraph 5.47 considered the complications suffered by some mothers.

Babies of unmarried mothers were taken from them and withheld

7.176 The preceding section regarding the role of CWD/DCW referred to the practice of children being taken from mothers immediately or shortly after birth, and then being withheld from them. Some mothers recalled an officer from the CWD/DCW took their child, while others stated it was the nurses and medical staff who did so.[1151] The exact procedure appears to have varied. Many contributors recalled their child being removed from the room immediately following birth.[1152]

> I remember this, plus the theatre when she was born and seeing her in the distance in the room and being told no I couldn't hold her.[1153]

7.177 Other mothers recalled their baby being in the room, but out of reach, with no offers to hold or nurse it.

> The baby was swaddled in a crib up against the opposite wall a couple of metres away, out of my reach.[1154]

1145 Submission 103.

1146 Submission 37.

1147 Submission 59.

1148 Submission 59.

1149 Submission 1.

1150 Submission 109.

1151 Paragraphs 4.123; 5.52 to 5.54; 6.28 to 6.31.

1152 Submission 116a.

1153 Submission 94.

1154 Submission 37.

7.178 In most cases mothers were not even able to see their child when it was born. Some mothers had their view obscured by a sheet,[1155] or their face was covered,[1156] some had their view blocked by nurses,[1157] and others simply had no opportunity before the baby was taken from the room.[1158]

7.179 Some mothers were told that they could not have contact with their child. Even when they were not expressly told that it was not permitted, mothers formed the understanding from the way they were treated and the omission of offers for information about their child or contact with the child that it was not permitted.[1159]

FINDING 29

Staff at public hospitals removed, and facilitated the removal of, babies of unmarried mothers immediately and shortly following their birth.

FINDING 30

Staff at public hospitals prevented unmarried mothers from seeing, touching or holding their babies when they were immediately removed following birth.

7.180 The actual extent of contact and information that mothers were permitted to have with their children varied significantly from none, to only looking, or holding the child.

> I wanted to see my baby, but I was denied.[1160]
>
> I was taken to a ward where I requested to see my baby. The request was refused. I was distressed and crying and went looking for my baby several times and each time I was taken back to my room without seeing her.[1161]
>
> I was taken to the special nursery at my request the next morning to see my daughter but was kept a distance away and not allowed to even touch her.[1162]
>
> I kept asking to see my son and was refused until about four days later. I was taken up and down lifts and corridors and permitted to view him through the nursery glass window. I was permitted no touching, no holding, no feeding and there was no way that I could ever find the nursery in the hospital maze.[1163]

7.181 The Committee is of the view that this was standard practice, if not policy, within public hospitals.

FINDING 31

Staff at public hospitals did not permit unmarried mothers to have contact with their babies after they had been removed.

1155 Submission 73.

1156 Submission 59.

1157 Submission 81.

1158 Submission 116a

1159 Submission 124a.

1160 Submission 115.

1161 Submission 73.

1162 Submission 103.

1163 Submission 37.

Some staff occasionally deviated from the usual procedure in acts of kindness to mothers

7.182 Some mothers described kindness or compassion from staff during their stay in hospital.[1164]

7.183 Kindness was received from young nurses who assisted mothers to see or hold their child after birth, as described in paragraphs 5.82 and 5.83.[1165] In almost all cases it was clear that this was not considered the norm. It took place quietly and carefully, and appeared to be without the knowledge or sanction of more senior staff.[1166] There was never an officer from CWD/DCW present.

7.184 Mothers also described compassion from nurses and trainees when they were receiving care:

> There was only two nurses who treated me with any compassion and kindness. Unfortunately they headed back to Sydney after they graduated…for about four days I was very well looked after by a untrained nurse who was very kind.[1167]

> Only one young nurse treated me with dignity and compassion.[1168]

7.185 While many doctors had only brief contact with mothers for check ins and birth, and many seemed disinterested in mothers as their patients, there were also occasional examples of doctors using their considerable power in the interest of mothers, as described in paragraph 5.144.

FINDING 32

Some staff at public hospitals treated unmarried mothers well and surreptitiously assisted unmarried mothers to see and hold their babies after they had been removed.

Babies of unmarried mothers were given names in nurseries that differed from the names given to them by their mothers

7.186 As considered in paragraphs 5.73 and 5.74, more than one contributor discovered that a child had been given a different name in the hospital's nursery to the one given by their mother at birth.[1169]

> I identified my own baby immediately and saw that her name tag said "Katherine". I asked why they had named her as she was my baby and I had named her Emma. They said it was her new name, leading me to believe the new parents had already picked her name. (Not so.)[1170]

FINDING 33

Staff at public hospitals gave names to children of unmarried mothers that differed to the name given by the mother at birth.

7.187 No explanation for the different names given to babies in nurseries was provided to the Committee.

1164 For example: Submission 104; Submission 103; Submission 37.

1165 See also Submission 81.

1166 Submission 115. Submission 124a. Submission 1.

1167 Submission 104.

1168 Submission 103.

1169 Submission 110, Submission 29.

1170 Submission 1.

Staff moved children without permission from mothers, and were dishonest with mothers about the location of their children

7.188 In and around 1975 it was clear from evidence that there was a procedure at KEMH for babies of unmarried mothers assumed for adoption to be moved to a separate ward at the Kensington Annexe.

> I was told she had gone, when in fact she was still in the hospital – they had moved her form the Special Nursery (where I had visited her) to the Kensington Annex and not told me that was where she was. I had not signed any paperwork at that stage.[1171]

FINDING 34

Officers at King Edward Memorial Hospital relocated babies taken from unmarried mothers without their knowledge or consent and prevented their mothers from locating them.

7.189 Multiple mothers asked staff at the hospital to return their child to them, whether during their admission or by returning to the hospital following their discharge. On these occasions many were told that their child was gone, and often that their child was with their new adoptive family.

7.190 When these mothers obtained the records of their child's adoption, often many years later, they discovered that this was untrue. In some cases the child was still in a ward at the hospital, including at the nearby Kensington Annexe. In other cases, the child had been placed with the institution that had arranged the adoption (such as Ngala) to await adoption. In some cases, their child was not even in the process of adoption, and entered into foster care. Chapter 5 considered the misinformation provided to mothers, the transportation of children without their mothers' knowledge, and the institutionalisation of children without their mothers' knowledge.

7.191 The consistent message provided to mothers during these contacts was that it was too late for them to do anything, because their child was already gone, and was now living a better and happier life, even where that was not the case.

FINDING 35

Staff at public hospitals misled unmarried mothers concerning the location of their child.

Staff witnessed misconduct by officers from CWD/DCW and did not intervene

7.192 The preceding section considered conduct by officers from CWD/DCW. Many instances of that conduct occurred within hospitals, in the presence of hospital staff.

7.193 While CWD/DCW officers appear to have taken the lead on any decisions concerning adoptions, and therefore were responsible for setting the standard, many incidents were described in which hospital staff were present and passive or complicit..

7.194 By failing to say or do anything, these staff members added to the confidence of officers from CWD/DCW that their conduct could continue without broader awareness and without consequences. It also contributed to the mothers' perception that there was nobody who supported them, that the way they were being treated was considered acceptable, and they had no power in the situation.

[1171] Submission 1b.

Staff witnessed misconduct by staff from other institutions and did not intervene

7.195 In a similar manner to the above, staff at hospitals witnessed concerning behaviour in relation to employees of institutions for unmarried mothers, and did not involve themselves. As described in paragraph 5.100, one Mother was forced by the Matron of Hillcrest to return from KEMH to that institution, when she could barely walk. Staff at the hospital did not speak to the mother or intervene on her behalf.

Unmarried mothers were not provided with any information or post-natal care

7.196 Unmarried mothers were frequently discharged following their birth without any follow up appointments or mention of care they might require.[1172] One contributor had private insurance and received postnatal care on a private basis. However, most other mothers shared that they had no postnatal care and suffered complications following birth.[1173] With appropriate information and follow up, these complications might have been treated earlier and the impact minimised.

Staff failed to provide relevant medical information concerning infants

7.197 Correspondence available to this Committee indicates that the movement of babies between hospitals and institutions at times suffered from a communication breakdown in which relevant medical information about the child's care was not passed on.[1174] In these instances, the focus on facilitating adoptions as efficiently as possible appeared to eclipse any focus on the immediate wellbeing and health needs of children.

Department of Justice

7.198 The Department of Justice oversaw the courts responsible for processing applications for adoption orders during the 20th century.

7.199 The Supreme Court of WA processed adoption applications, and from 1976 onwards, the Family Court of Western Australia. Officers at the Supreme Court also assisted with adoptions by witnessing the signing of documents for adoption, including consent forms.

FINDING 36

The Supreme Court of Western Australia, and the Family Court of Western Australia, administered by the Department of Justice, played a role in past forced adoption in the 20th century.

Courts processed applications for adoption orders

7.200 As noted in paragraph 7.109 above, the available evidence indicates that applications for adoption were ordinarily dealt with by judges 'in chambers'. This refers to consideration and determination by the judge without a hearing, by considering the documents filed on the matter. The documents required varied over the course of the century, with the development of the law and the related rules.

7.201 This process of adoption applications meant that judges did not have an investigatory role. Judges decided, on the basis of the documents before them, whether the requirements for an adoption had been met. If so, the order would be granted.

7.202 Often, the documents filed for an adoption application had been prepared by the Child Welfare Department or later Department for Community Welfare (CWD/DCW), or a private

[1172] Submission 124a.

[1173] Submission 104.

[1174] Submission 110.

lawyer for the adoptive parents. There was considerable dependence upon those documents being truthful and providing a full understanding of the circumstances relevant to the judge's determination. Unfortunately, in at least one case an affidavit was filed in the Court which omitted crucial information in a way that favoured the granting of an adoption order.[1175]

7.203 Those documents included a report by CWD/DCW regarding the applicant for adoption. The contents of that report changed over time, with the requirements set out by the Adoption of Children Act. Throughout this period, those reports were a persuasive part of the evidence before a judge.

7.204 The legal significance of investigations by CWD/DCW into the suitability of an applicant for adoption gained weight in 1970. Amendments to the law provided that, where the CEO of the Department was satisfied that an applicant for adoption was a fit person to adopt, this was conclusive evidence of that fact. This meant that, if the CEO reported that they considered the applicant a fit person to adopt, there would generally be no basis for a judge to come to the opposite conclusion. However, the same was not true where the CEO reported that an applicant was not a fit person to adopt. In those circumstances, the judge could still conclude that the applicant was a fit person to adopt.

7.205 This change limited the ability for judges to consider the reports provided and the basis for any finding as to whether an applicant was a fit person to adopt. Where before, judges may review a report finding that an applicant was a fit person to adopt, but might not be satisfied that this was the case (and then refuse to grant the order of adoption), this was no longer open to them.

7.206 For the period between 1940 and 2003, a government publication provides an analysis of the total adoption applications filed with the court, compared to the number of adoption orders granted.[1176] It is important to note that these figures are not always as useful as readers might hope, because:

- Departmental figures were often kept for the financial year, while the court records referred to use the calendar year. Where some years saw more than 600 applications or orders, this difference can have a significant impact.
- An application filed in a certain calendar year was not necessarily dealt with by the court within that calendar year.
- Where an application did not result in an adoption order being granted, this could be due to refusal by the judge to grant the order sought, or could be due to the application itself being withdrawn.

7.207 Noting the above complexities, comparing the total figures for each decade indicates that a small number of adoption applications did not result in adoption orders being granted.[1177] It seems likely that where issues arose with an application, the applicants were provided with the opportunity to rectify any issues. However, the inquiry did not have any evidence in relation to applications that had been refused, and so was unable to make any observations

[1175] See paragraphs 7.108 to 7.113; Submission 73.

[1176] Department for Community Development, *ROADS: An index to locations and access to adoption records*, 2004, p 130.

[1177] Approximately 2.4% from 1960 to1969, 0.4% from 1970 to 1979, and 8.1% from 1980 to 1985.

of evident issues within applications, or the quality of applications, and whether they were granted by the court.[1178]

FINDING 37

The framework for adoptions in the 20th century resulted in judicial officers being increasingly made to rely upon documents prepared by proponents for adoption (including the Department, and private solicitors engaged by prospective adopters) when determining applications for orders of adoption.

Involvement in adoption did not extend beyond the Courts' statutory role

7.208 The Department of Justice appears to have had very little involvement in adoption processes beyond the statutory role of the Courts to consider and determine adoption applications.

7.209 The documents provided to judges for adoption applications were not seen to give any indication of the problematic treatment of mothers and behaviour towards them. Without that information, there was no way for judges determining adoption applications to know what had happened in the matters they were deciding.

7.210 As was noted by then Justice Richard Chisholm when giving evidence to the Senate inquiry into forced adoption, adoption was a legal framework almost devoid of activity by lawyers.[1179] In most submissions and records, unless lawyers were involved in arranging the adoption itself, there was no evidence of any involvement by them until the application was put before the Court. Even where lawyers were involved, this was usually on behalf of the applicant or CWD/DCW, and only to the limited extent that seemed necessary to sign off on documents or arrange the adoption itself.

Judges contributed to adoption law reform

7.211 Judges were also involved in the reform of adoption law, particularly in the first half of the century. Hansard indicated multiple occasions where judges were noted to have sought changes.[1180] Amendments within the 1949 bill were touted as being 'the recommendations of judges'.[1181]

Justices of the Peace and court officers witnessed signatures and mothers' distress

7.212 Many contributors stated that they were taken to the court after their discharge from hospital, where they signed paperwork for the adoption of their child. However, this was not the only process used. Other contributors were taken to see a lawyer, whether private or at CWD/DCW, or an officer at CWD/DCW who was authorised to witness signatures.

7.213 While at the court, many mothers were not in a fit state to be signing legal documents. Multiple mothers were taken directly to the court following discharge and may still have been under the influence of medications and processing the trauma of birth.[1182] Some mothers also shared that while at the court building they were clearly upset, and discussions took place with the officer present. This indicated they were being given no choice as to whether their child was being adopted. Much like the staff at public hospitals, this evidence

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1178 See: Department of Communities, email, 7 June 2024; Department of Justice, email, 1 July 2024. The Committee noted Submission 143, which appears to relate to proceedings in which an adoption order was sought while the mother continued to refuse to consent.

1179 Senate, Standing Committee on Social Issues, Report on Adoption Practices: Second Interim Report, Transcripts of Evidence, 16 June 1999 – 25 October 1999, p 151.

1180 See Chapter 3.

1181 Legislative Assembly, *Debates,* 1949, p 695.

1182 As considered in Chapter 6.

suggested that some staff at courts were complicit in the unethical and improper conduct taking place.

CHAPTER 8
The role of private institutions & health services

8.1 This chapter explores how non-government individuals, institutions and organisations played significant roles in adoption in the 20th century, and in forced adoption.

8.2 Maternity homes and hospitals for unmarried mothers were central to many contributors' experiences. In Western Australia, the three primary institutions involved in forced adoption were the Alexandra Home/Ngala, Hillcrest, and St Anne's (see glossary for full details). These institutions each provided accommodation and delivery of babies for unmarried women during the 20th century. Each institution varied in the specifics of how they arranged adoptions, and the practices that surrounded this. However, they also had many practices in common, including the application of pressure on mothers through various means to coerce them into agreeing to the adoption of their children, and the separation of mothers and their children at birth.

8.3 In addition to the three institutions above, private hospitals were also involved. In some cases, institutions for unmarried mothers set up their own private hospitals, or operated alongside them. Contributors also provided evidence about the role of private health practitioners, including general practitioners and psychiatrists. Finally, private solicitors were instrumental in formalising privately arranged adoptions. Some solicitors and doctors appeared across evidence from multiple contributors.

8.4 This chapter considers the role of each of the above in past forced adoption.

Ngala

8.5 The organisation now known as Ngala historically operated under the following successive names:

- at its inception in 1890, as the House of Mercy
- from 1916 to 1949, as the Alexandra Home for Women
- from 1949 to 1956, as the Alexandra Home for Mothers and Babies and Mothercraft Training School
- from 1956 to 1989, as Ngal-a Mothercraft Home and Training Centre
- from 1989 to 2001, as Ngala Family Resource Centre
- by 2001 (following a less formal transition), as Ngala.

8.6 Name changes often coincided with other significant operational changes, such as location, central staff members, and services provided.

Ngala worked closely with the WA government Department

8.7 Unlike the other prominent non-government institutions that worked with unmarried mothers in the 20th century, Ngala had no religious affiliations.

8.8 Ngala began as the House of Mercy in 1890, a charitable institution with the focus of sheltering and 'reforming' women who had 'fallen from virtue'. Initially, the House of Mercy

had a private management committee formed entirely of women.[1183] Those women were usually the wives or widows of influential men.[1184]

8.9 The House of Mercy funded its operations through charitable donations and subscriptions, and also through a commercial laundry service where women staying at the house were expected to work.[1185] The House Rules included:

> 3. Applicants on entering shall give up any money they may have to the Matron, to be taken care of by the Committee till they leave, or appropriated to their use if necessary.
>
> …
>
> 5. A certain percentage of the earnings of each Inmate (to be allotted at the pleasure of the Committee) shall be paid to her when she leaves the House with the approval of the Committee.
>
> …
>
> 9. All swearing and improper language is forbidden in the House. When the offence is persistently committed, the Matron shall report the name of the offender to the Committee who shall have the power to fine the offender an amount not exceeding her earnings for that week in which the offence is committed.[1186]

8.10 From its beginning, the House of Mercy and the care it provided were closely tied to the state government. A history of the institution records that the House of Mercy's Treasurer was authorised to collect 'monies overdue for indigent cases' from the Colonial Secretary's Department, at a value of £2 2s 0d per case and 10s 6d a week for maintenance of a child.[1187] Another note refers to the Government payment for cases they had sent in being insufficient to cover the costs incurred.

8.11 'Paying cases' first began to be admitted in 1898.[1188]

8.12 There is evidence that the House of Mercy's management committee had close ties and a consultation-type relationship with government, including in relation to the opening of KEMH.

8.13 The earliest available record of adoption through the House of Mercy is present in the Matron's diary from 21 December 1895, which states:

> Jessie C. 22 had twins, girl adopted, boy died.[1189]

1183 C McMeekin, *Raising Ngala*, Ngala, 2021, p 9.

1184 See: J Lang, *The Open Door: A history of loving care for families*, Ngala Mothercraft Home & Training Centre Inc., 1980, pp 9-11; C McMeekin, *Raising Ngala*, Ngala, 2021.

1185 J Lang, *The Open Door: A history of loving care for families* pp 20, 28, 38, 39, 48, 50, 54; C McMeekin, *Raising Ngala*, p 10.

1186 J Lang, *The Open Door: A history of loving care for families*, p 14.

1187 J Lang, *The Open Door: A history of loving care for families*, p 31. There is no further information provided regarding these figures or which cases they were for.

1188 J Lang, *The Open Door: A history of loving care for families*, p 22.

1189 J Lang, *The Open Door: A history of loving care for families*, p 19.

8.14 At the time of becoming the Alexandra Home the state government continued to contribute towards services[1190] which included provision towards new premises.[1191] There were also other notable contributions from individuals.[1192]

8.15 Until 1936, women gave birth at the Alexandra Home. [1193] From 1936 onwards, they were sent to KEMH to give birth. Women were also referred to the Alexandra Home from KEMH.[1194]

8.16 In 1936 a new Matron was appointed. Her report includes the following information on adoption practices:

> The usual interview takes about an hour. I have to sit & listen to tales of woe & sorrow, some of which there is no truth in.
>
> …
>
> Take the girls to KEM when in labour & go up again later to collect the bonus for each girl.
>
> …
>
> Other girls cannot express OR WILL NOT express their breasts. This is then done by me.[1195]

8.17 In 1945, 36 babies were adopted through the Alexandra Home.[1196] Records state that there were careful checks for suitability, and they were placed into good, comfortable homes, where they would have 'every baby's birthright: love, happiness, a good education and a start in life'.[1197]

8.18 In 1946 representatives for the Home met with John Tonkin, the Minister for Child Welfare, to discuss opening a Mothercraft Training Scheme.[1198] The Minister agreed that the Government would guarantee payment for every baby in the Home whose mother could not afford to pay.[1199] The Mothercraft Training School commenced operating in 1949, from a new wing at the home.

8.19 In 1955 the Director of the Child Welfare Department approached the home to consider caring for children under three years of age who were, at that time, at the Government Reception Home in Mount Lawley.[1200] It was the Director's preference that the home be non-denominational.[1201]

1190 J Lang, *The Open Door: A history of loving care for families*, p 48.

1191 J Lang, *The Open Door: A history of loving care for families*, p 26.

1192 J Lang, *The Open Door: A history of loving care for families*, p 26.

1193 J Lang, *The Open Door: A history of loving care for families*, p 39.

1194 J Lang, *The Open Door: A history of loving care for families*, p 37.

1195 J Lang, *The Open Door: A history of loving care for families*, pp 41-42.

1196 J Lang, *The Open Door: A history of loving care for families*, p 46.

1197 J Lang, *The Open Door: A history of loving care for families*, p 46.

1198 J Lang, *The Open Door: A history of loving care for families*, p 47.

1199 J Lang, *The Open Door: A history of loving care for families*, p 47.

1200 J Lang, *The Open Door: A history of loving care for families*, p 55.

1201 J Lang, *The Open Door: A history of loving care for families*, p 56.

8.20 With investment from the State, a building was constructed on a new site. The Government provided a grant of £120,000, and the State Lotteries provided a grant of £50,000.[1202] The home's committee also raised funds through donations.[1203]

8.21 The home was renamed Ngal-a Mothercraft Home and Training Centre (Ngala) in 1955 when the new building opened. The mother and baby wing was named the Alexandra Wing.

8.22 Despite significant funding and assistance from the Government, the Ngala management committee maintained a focus on independent ownership and management.[1204]

8.23 Ngala first implemented a Medical Advisory Board in 1958.[1205] A new Matron was also appointed. This Matron had completed training at the Children's Hospital, at KEMH, and then (for Child Welfare Training) at the Presbyterian Babies' Home in Melbourne. In 1956 she was awarded a scholarship to study at the College of Nursing Australia for the Nursing Administration Diploma. She then served on the Administration Staff of KEMH until commencing as Matron at Ngala in 1959.[1206]

8.24 A contributor expressed concern about the extent of the Matron's power when it came to decisions involving children and prospective adopters. She recalled being made to serve tea for a meeting in the Matron's office in 1975:

> I wondered why on earth were we there to serve when they just had to stand up and serve themselves. I also had the strange feeling that it was somewhat "staged" – that we were there for another purpose. There were looks passed between the 'guests' and also between them and Matron and I just felt something was odd. I have always held the opinion that the 'guests' were prospective parents and were eyeing this other girl and myself over – like so much livestock – to see what our babies might be like.[1207]

8.25 In the 2 months after Ngala's opening, '50 infants had passed through'.[1208] No breakdown is provided for how many of these infants were cared for through the arrangement with the Government, in the mother and baby wing, or as babies of unmarried mothers. A further entry states that Ngala had 'sheltered over 230 souls' by the end of its first 4 months.[1209]

8.26 The Government continued to significantly fund Ngala. Their subsidy had been £12,300 as the Alexandra Home and had increased to £21,643 at Ngala.[1210]

8.27 A history for Ngala titled '*The Open Door*' provides a summary of the Adoption of Children Act and internal adoption procedures in 1960 and 1961.[1211] Some aspects of that summary are incorrect when compared to the actual legislation in effect at the time.

1202 J Lang, *The Open Door: A history of loving care for families*, , p 57.

1203 J Lang, *The Open Door: A history of loving care for families*, p 57.

1204 J Lang, *The Open Door: A history of loving care for families*, p 59.

1205 J Lang, *The Open Door: A history of loving care for families*, p 59.

1206 J Lang, *The Open Door: A history of loving care for families*, p 61.

1207 Submission 1b.

1208 J Lang, *The Open Door: A history of loving care for families*, p 63.

1209 J Lang, *The Open Door: A history of loving care for families*, p 65.

1210 J Lang, *The Open Door: A history of loving care for families*, p 64. The text goes on to note that the deficit for the first year (of £21,000) would then become the Government subsidy for the following year, plus an 'additional amount' of £4,000.

1211 J Lang, *The Open Door: A history of loving care for families*, p 66.

8.28 *The Open Door* states that in the year ending 1961, Ngala arranged 46 adoptions.[1212] It describes that the Adoption Panel consisted of a psychiatrist, a paediatrician, a family practitioner, a social worker, the President of the Ngala committee, and the Matron.[1213]

8.29 It appears from the available records that upon becoming Ngala in 1955, and likely tied to its agreement with the Government to care for children under the age of 3 who would otherwise have been at the Government Reception Home, the service began admitting Aboriginal and Torres Strait Islander children.[1214]

8.30 From 1955 onwards the extent of involvement between Ngala and the Department became more difficult to define. Different services appear to have been subsidised or funded by the government. In a 1977 guide, the Department lists Ngala under its Facility and Hostel Services section:

> One of the functions of Ngal-a is to provide care for children up to three years old who are unable to be placed elsewhere by the Department.[1215]

8.31 Ngala continued as a confinement home for unmarried mothers, including Aboriginal girls and women from across the state.[1216] A contributor in evidence recounted becoming friends with an unmarried pregnant Aboriginal woman from 'up north' during her time at Ngala in 1969.[1217]

Mothers who stayed at Ngala from 1936 onwards gave birth elsewhere

8.32 Unlike Hillcrest and the Sisters of Mercy institutions, Ngala did not continue to provide hospital services to deliver children at its institution throughout the 20th century. After KEMH opened, there was some desire within Ngala to continue to provide their own service, out of concern that they would lose influence over mothers if they were permitted to leave to give birth at another facility. However, from 1936 onwards Ngala no longer provided hospital services to mothers. Mothers were sent to hospitals by Ngala to give birth. In accordance with Ngala's procedure, often the mother and child returned to Ngala separately following the birth.

8.33 Many contributors shared their experiences of staying at Ngala during their pregnancy and following birth. In the evidence before the inquiry, mothers from Ngala were most often sent to KEMH. Records indicate that Ngala also sent mothers to the South Perth Community Hospital, although this was less common in the accounts of contributors.

8.34 One contributor stayed at Hillcrest, gave birth at KEMH, and was then sent to Ngala to surrender her child for adoption.[1218] It appeared that the staff at Hillcrest were busy and unwilling to care for her child, and had not arranged adoptive parents, so sent her to Ngala.

1212 J Lang, *The Open Door: A history of loving care for families*, p 66.

1213 J Lang, *The Open Door: A history of loving care for families*, p 66.

1214 J Lang, *The Open Door: A history of loving care for families*; C McMeekin, *Raising Ngala*, Ngala, 2021, p 111, 153, 155.

1215 Department for Community Welfare, *A Guide to Services*, 1977, p 20 (attached to Department of Communities, email, 7 June 2024).

1216 See Submission 110.

1217 Private individual 5, transcript of evidence.

1218 Submission 60.

Ngala worked closely with the Department and King Edward Memorial Hospital to arrange adoptions

8.35 Ngala was also unique among institutions involved in forced adoption because it had closer ties to the WA government, officials, the Department, and KEMH.

8.36 As noted above, the management committee of Ngala was historically populated by the wives of influential men. Records indicate that at least 2 of the 'six hungry families' of Perth were connected to the early management committee. These connections meant that Ngala was well positioned in the early 20th century to benefit from government funding and grants.

8.37 When the state government was considering opening a hospital for women, Ngala's management were involved in those discussion. When Ngala discussed funding inadequacy at a meeting, a government official was present and offered to follow this up for Ngala.[1219]

8.38 Ngala also became the only non-government institution approved for foster care for children under the age of 3. It received funding for the care of those children.

8.39 Records from 1944 refer to the then-Alexandra Home becoming aware that babies were being adopted privately from KEMH.[1220] The President and Secretary of the Alexandra Home Committee visited the Matron of KEMH, and the Matron agreed that all babies born at KEMH were to be returned to the Alexandra Home for adoption, and instructions for women attending the pre-natal clinic were to be sent in writing to the Matron of the Alexandra Home.[1221]

8.40 Ngala also had a close working relationship with the Department and its workers. Most adoptions that occurred through Ngala in the evidence appeared to be publicly arranged adoptions through the Department.[1222] Ngala appeared to have regular visits by 'social workers' from the Department, including for interviews with mothers to obtain information for an adoption and complete the pre-birth adoption paperwork.

> She got very annoyed with me and had the nerve to ask me how many sexual partners I'd had before I became pregnant…. Through sobs I informed her he was my first… I then refused to answer any more and walked out. I was gutted. Was I on trial here, am I a Criminal.[1223]

8.41 An adopted person submitted that one Matron of Ngala secured 'hundreds' of adoptions during her long tenure. The submitter was told that the Matron and Department officers arranged adoptions together:

> [Matron] dispatched me to strangers with the power of her pen, I wasn't a 'chosen' daughter, as was often said to adopting parents by well-meaning family and friends. … The notion of being 'chosen' is entirely untruthful. Matron [Name] and Welfare officers such as [Name] worked closely together to allocate adoptees with current waitlisted married applicants who were seeking to adopt. The matching of physical features between the newborn and their allocated family were considered closely in this process. My adoptive mother reports this was explained to her during an early conversation with [Matron].[1224]

1219 J Lang, *The Open Door: A history of loving care for families*, p 55.

1220 J Lang, *The Open Door: A history of loving care for families*, p 46.

1221 J Lang, *The Open Door: A history of loving care for families*, p 46.

1222 See also H Charlesworth, JS Battye Library of West Australian History, *Oral History Programme: verbatim transcript of interview with Beryl Grant*, Library Board of Western Australia, p 27, 42.

1223 Private individual 5, tabled paper 1.

1224 Submission 110.

8.42 One contributor recalled that her doctor had arranged for her to attend Ngala and had known a couple wanting to adopt.[1225] Because of this, she had not seen a social worker during her stay. This was the only adoption through Ngala within the evidence that appeared to be a private adoption.

FINDING 38

The Alexandra Home for Women, the Alexandra Home for Mothers and Babies and Mothercraft Training School, and Ngal-a Mothercraft Home and Training Centre arranged adoptions during the 20th century.

FINDING 39

The Alexandra Home for Women, the Alexandra Home for Mothers and Babies and Mothercraft Training School, and Ngal-a Mothercraft Home and Training Centre played a significant role in past forced adoption in WA.

Mothers were not provided with support or assistance, or told of any support they could access

8.43 Many contributors shared that they were not provided with support or assistance while at Ngala.[1226]

> I was in Ngala at the very beginning of 1969 and I had no assistance whatever. It was do your job to pay your way, give birth, leave your child, and in 10 days go. No counselling or help just go, sign Adoption papers at the Supreme Court in Perth and forget you were here.[1227]

8.44 It was clear from the evidence that even staying at Ngala resulted in an assumption by staff at Ngala, the Department, and KEMH, that a mother's baby would be adopted. Like many institutions, there was no discussion with mothers of alternatives, or of whether adoption was actually what they wanted for their child:

> Neither the social worker nor the Matron gave me any opportunity to discuss keeping my baby.[1228]

> There was never any conversation about keeping our babies or about what support we would receive if we did… At all steps of our time there we were encouraged and intimidated to give our babies up for adoption. There was also no counselling or support provided to us to help us deal with the trauma.[1229] [1979]

8.45 Yet the process of adoption was not explained to mothers:

> during that time never once was the process and procedure of adoption discussed nor was I asked if that was what I wanted.[1230]

8.46 There was also no explanation of what to expect for childbirth, which meant that women at Ngala were unprepared:

1225 Submission 81.

1226 Submission 89; Private individual 5, tabled paper 1.

1227 Private individual 5, tabled paper 1.

1228 Private individual 5, tabled paper 1.

1229 Submission 126.

1230 Submission 47.

> In the early days at the home, [the Matron] said that it would be explained what to expect closer to the time of the birth, but I heard nothing from her except to criticize or reprimand and no advice or information was given by the medical staff at the Outpatients Clinic who supposedly explained to the girls, as expectant mothers, what to anticipate up to and after birth, but they didn't either, so I remained ignorant until the end: a distressing shock.[1231]

Mothers were pressured and coerced to agree to the adoption of their children

8.47 The assumption that children would be adopted was further reinforced by the leadership of Ngala, who would speak to mothers individually:

> Over the weeks I was there I was called into [the Matron's] office quite a few times as she tried to convince me to adopt and think of the baby's best future. Never at any time was I advised that there were other options—that I could get support from other sources. I was never told that I had other options besides adoption.[1232]

> She also made it clear that my baby was not 'my' baby - there was no way I was going to keep 'it' if I wanted to stay in the home, 'it' was to be adopted out. She spoke as if the babies we were carrying were illusory.[1233]

8.48 The Matron at Ngala also worked together with staff from the Department to convince mothers that their child should be adopted. When one contributor continued to oppose adoption, the Matron resorted to lying to her about the father of her child, which undermined the mother's relationship with her strongest supporter.[1234]

8.49 Many mothers were very young. One contributor stated she was the eldest, at 17 years in 1975.[1235] Despite their ages, it was common for discussions about adoption to take place with young pregnant women alone, without the presence of their parents.[1236]

8.50 Staff from the Department visiting mothers in Ngala also lied about the realities of adoption, to 'mollify' mothers and convince them to accept the adoption of their child.[1237]

Mothers were shamed for their pregnancies

8.51 Although Ngala was a secular institution, women were still shamed by staff:

> There was always talk amongst the girls that they were going to keep their babies and no-one could stop them. But the welfare department had their own ideas, and we were told that we had no right. , We were told that we were unmarried and therefore could not look after a baby. That we were disgraceful and promiscuous and should be ashamed of ourselves for getting into "trouble". I learnt a lot of new words in there.[1238] [1966]

> The nurses were generally dismissive or outright rude to us. When they were rostered to do the bed-time check (patrolling the corridor of our locked ward and

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1231 Submission 81.

1232 Private individual 23, transcript of evidence.

1233 Submission 81.

1234 Private individual 23, transcript of evidence. See also paragraph 4.90.

1235 Submission 1b.

1236 Private individual 23, transcript of evidence.

1237 Submission 1. See also paragraph 4.141.

1238 Submission 108.

> shining a torch into our rooms to make sure we were in our beds), they called it "slut duty".[1239] [1975]

8.52 The attitude and lack of support were echoed by leadership, including the Matron. One contributor recalled that in the initial interview, the Matron had told her mother that it was a condition of entry for her to be tested for sexually transmitted diseases.[1240]

> [The Matron] was a formidable, cold person, with a nasty temper and a sharp voice who ran the home very strictly. It was a given your child was for adoption for you to stay at the home and you were never allowed a second chance to go there if you became pregnant again.[1241] [1957]

> [The Matron] (rest her soul) was not the lovely lady she portrayed to be…. To the unwed mothers to be, she was blunt, abrupt, callous and at times brutal with her words, and showed a distinct dislike for us all.[1242] [1969]

8.53 The pressure placed on mothers continued until the necessary documents could be signed. The documents themselves did not reflect the coercion and pressure that mothers felt and faced:

> It states so coldly that I wished the child to be placed for adoption, like I was a willing participant with no doubt in my mind and heart. This was so not true. It was signed under relentless coercion and a lie when I was emotionally vulnerable four weeks after my suicide attempt.[1243] [1971]

Mothers in Ngala were isolated and felt like prisoners

8.54 While not all mothers who stayed at Ngala specified that they were prevented from leaving the grounds during their stay, most had the understanding that they were not free to come and go:

> There was a six foot steel fence surrounding Ngala. It felt like a prison. I guess it was to stop anyone entering or the girls escaping.[1244]

8.55 One mother referred to herself as a 'prisoner' and recalled that they were not allowed to leave, even to go to the shops.[1245] However, some contributors recalled being permitted to leave to attend church, or to go to the shops up the road.[1246] Another contributor noted that she had been 'occasionally' allowed home on weekends for a meal with her family.[1247]

8.56 Mothers in Ngala were also isolated from support, and in particular the fathers of their children.

> They kept us away from our support networks, including the fathers. My sister and brother in law would come to visit me but they would not let my brother in law or

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1239 Submission 1.

1240 Submission 59.

1241 Submission 81. Note that the comment regarding 'a second chance' to attend the home is consistent with records of the historic policies of the institution, which would not ordinarily accept women who had 'fallen from grace' a second time.

1242 Private individual 5, tabled paper 1.

1243 Private individual 23, transcript of evidence.

1244 Submission 89.

1245 Submission 126.

1246 Submission 108.

1247 Submission 89.

> any men in to visit. Because they didn't want the fathers there. This was very hard for me and for the women there.[1248] [1979]
>
> He had found out that I was in Ngala. One day he came to the boundary fence and climbed on top of the fence and kept calling out my name. Ngala called the police to have him removed.[1249]
>
> I heard stories from the other girls of how their boyfriends were supportive and wanted to be with them but were not allowed in… some had tried to sneak in to see their girlfriends or had tried to call to them through the fence and that was why we were locked in the dormitory at night and why we couldn't go to the area near the fence. So we were effectively cut off from supportive partners and friends.[1250] [1975]

8.57 Some contributors had visitors during their stay,[1251] while others did not, and were completely isolated during their stay.[1252]

Mothers received inadequate care at Ngala while pregnant

8.58 One contributor provided evidence that during her time at Ngala, her diet was so poor that she lost weight and her doctor became concerned:

> the weekly menu they posted on our dining room notice board and submitted to [the Matron] for approval was not the food we received.
>
> …
>
> I was actually seen by the visiting doctor at one point because I was having episodes of near-fainting. He was shocked to learn I was living on mostly Weet-Bix (which I ate as I couldn't face the food served) and was actually losing weight even though in late pregnancy. He told me to try and get my hands on more protein, and I found that by putting too much meat on the plates of the Matron and head nurses at her table, for which she would chide me, I could then take the leftovers and eat what was meant for the bin.[1253] [1975]

Mothers were made to perform labour while staying at Ngala

8.59 Similar to other institutions for unmarried mothers, contributors who shared their experiences staying at Ngala recalled that they were expected to do work each day, as set by a timetable.[1254] One contributor noted that not all girls were rostered on for work.[1255] Although the reason for this was not clear to her, other mothers in evidence explained being excused or given light duties when they developed high-blood pressure.

8.60 The work included cleaning, laundry, and working in the kitchen and dining room.[1256] One mother recalled her job in the laundry folding sheets, towels, nappies, and young toddlers' clothing.[1257] Another contributor stated her mother had been expected to knit baby clothing,

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1248 Submission 126.

1249 Private individual 23, transcript of evidence.

1250 Submission 1; Submission 1b.

1251 Submission 89.

1252 Private individual 5, transcript of evidence; Submission 1.

1253 Submission 1.

1254 Private individual 5, transcript of evidence.

1255 Private individual 5, transcript of evidence.

1256 Submission 103; Submission 108.

1257 Submission 89.

for sale at Ngala's Opportunity Shop.[1258] Work by mothers at institutions is also considered in Chapter 4.

8.61 Many contributors confirmed that they were not paid for their labour at Ngala.[1259]

8.62 While some contributors did not receive a bill or otherwise pay for their stay at Ngala,[1260] others paid a weekly fee.[1261] One contributor noted that the lodgings differed depending on board paid: there were private rooms with ensuites, and wards with shared bathrooms.[1262] Another mother recalled that the government sickness benefit paid part of her board and her mother had paid the balance.[1263] Both paying and non-paying pregnant women reported working at Ngala during their stay.

8.63 One contributor recalled receiving a small weekly payment from the government while pregnant and in Albany, which was before her stay at Ngala.[1264] She then used those (and other) savings while staying at Ngala. Another mother noted that her sickness benefit was paid to Ngala during her stay, and she was still expected to work.[1265] This is notable, because records indicate that Ngala received some government benefit payments directly on behalf of mothers, and during certain periods, may not have informed mothers that it was doing so.[1266] There is also a clear contradiction in taking the 'sickness' benefit, which was paid on the basis that mothers were unable to work in their condition,[1267] and then expecting them to perform labour.

8.64 When staying at Ngala following birth, contributors were either allowed to rest or expected to do some (less heavy) work.[1268]

FINDING 40

Unmarried mothers at the Alexandra Home for Women, the Alexandra Home for Mothers and Babies and Mothercraft Training School, and Ngal-a Mothercraft Home and Training Centre were made to work and complete labour. In some cases, labour was unpaid and was performed despite women paying for their stay.

Mothers were not able to see or visit their children at Ngala after birth

8.65 Records indicated that mothers often gave birth at KEMH, and returned to Ngala following birth. Their babies also often returned to Ngala, where they were kept in a separate wing to the mothers:

1258 Submission 110.

1259 Submission 89; Submission 108; Private individual 5, transcript of evidence.

1260 Private individual 5, transcript of evidence.

1261 Submission 89.

1262 Private individual 5, transcript of evidence.

1263 Submission 81.

1264 Private individual 5, transcript of evidence.

1265 Submission 1.

1266 J Lang, *The Open Door: A history of loving care for families*, Ngala Mothercraft Home & Training Centre Inc., 1980, p 46; C McMeekin, *Raising Ngala*, Ngala, 2021, p 135.

1267 This development was noted within the Salvation Army's historic records for Hillcrest: Submission 141a (Salvation Army), entry for July 1945.

1268 Private individual 5, transcript of evidence.

> I was told that after the child was born, I would be taken back to Ngala separately and then [child's Name] would be taken back to Ngala, to the baby wing, where we would not encounter each other again. That is about all I was told.[1269]

8.66 Some mothers recalled that they were able to hear the babies crying:

> We were never allowed to see the babies but could hear them crying for their Mother's all night.[1270]

8.67 Some contributors referred to mothers who were able to see their children after birth. This did not seem to be common, and was not encouraged.[1271]

8.68 One contributor who was able to see her child understood from the nurse that it was against the rules, and she could be fired for doing it:

> one of the mothercraft nurses who had just started working there was a girl I used to work with at the GPO in Forrest Place. She told me that there were less staff on a Sunday and arranged with me to come to see my baby at the back door, with my mum in attendance as well. I could hold him for only five minutes because if she got caught, she would lose her job.[1272]

8.69 One mother recalled that women were prevented from leaving with their babies:

> Some of the mothers tried to leave with their babies and they weren't allowed. The nuns would take car keys off some of the women so they couldn't leave.[1273] [1979]

8.70 The same mother returned to Ngala after giving birth to pay her bill, and asked to see her baby:

> I asked to see my baby, they told me she wasn't there and I couldn't see her. The nuns intimidated me to leave.[1274] [1979]

8.71 One contributor recalled an occasion when a mother returned and managed to collect her child.

> I thought I would never see her again, but she came back 48 hours later to collect her son. Her parents were going to help her support him while she went back to work. Not many others did that.[1275]

Mothers were not informed of their ability to revoke consent

8.72 As noted in Chapter 3 and Chapter 6, mothers were technically able to revoke their consent prior to an adoption order being made, and from 1970 onwards could revoke their consent within 30 days.

8.73 Mothers were not informed by staff at Ngala, or the Department staff who visited them there, that they could change their mind or revoke consent.

1269 Private individual 5, transcript of evidence.

1270 Submission 108.

1271 Submission 110.

1272 Private individual 23, transcript of evidence.

1273 Submission 126. Unlike at some other institutions, Ngala staff were not nuns.

1274 Submission 126.

1275 Submission 108.

> And at no time did this social worker advise me that I could "change my mind" about the adoption within three months.[1276]

Some infants were neglected in the care of Ngala prior to placement

8.74 Evidence included examples of children being inadequately cared for whilst at Ngala, after birth and before being collected by prospective adopters or foster carers. This is considered further from paragraph 5.113.

FINDING 41

The Alexandra Home for Women, the Alexandra Home for Mothers and Babies and Mothercraft Training School, and Ngal-a Mothercraft Home and Training Centre engaged in pressure and coercion practices which caused unmarried mothers to agree to the adoption of their children.

RECOMMENDATION 1

Ngala commit to participating in a redress scheme in recognition of their involvement in past forced adoption.

The Salvation Army

8.75 The Salvation Army operated maternity homes across Australia during the 20th century. In WA the most prominent in relation to forced adoption was Hillcrest.

Hillcrest provided a maternity home and maternity hospital for married and unmarried mothers from 1922 to 1974

8.76 Hillcrest Maternity Home initially operated under the name the Open Door, but from the 1920s onwards was known as Hillcrest Maternity Home. Hillcrest also operated a maternity hospital on the premises, and this was referred to as Hillcrest Maternity Hospital, or the Salvation Army Maternity Hospital.

8.77 The home was initially located in North Fremantle. During the 1940s it relocated to West Perth, and then returned to North Fremantle after the end of World War II.[1277]

8.78 Prior to 1937, Hillcrest offered fostering services. During that period, 'fostering' was used by some parents to arrange care for their child on a private basis, unlike modern fostering.[1278]

8.79 Hillcrest also demonstrated a reasonably close working relationship with government agencies, including the Child Welfare Department and the Commonwealth Social Service Department. In 1945, the Commonwealth introduced unemployment and sickness benefits. The Child Welfare Department suggested Hillcrest claim for their 'pregnant girls', interviewed the women, and then decided that they would be eligible 2 weeks before confinement.[1279]

1276 Submission 103.

1277 In early 1942, World War II was underway, and arrangements were made for Hillcrest to operate from another premises because the North Fremantle location fell within the 'danger zone'. The new building in West Peth was smaller, so services for married women continued but work with unmarried mothers ceased. In mid-1944, Hillcrest returned to its North Fremantle location and resumed services for unmarried women. (Submission 141a (Salvation Army))

1278 In December 1937 there was an unknown outbreak at Hillcrest and 5 infants died. After some investigation by the Department of Health, Hillcrest decided to cease the fostering service. The Matron considered the fostering to be a considerable responsibility and worry, and it was also noted that the home was 'out of pocket' due to toddlers being left in their care and not paid for. The records indicate that Hillcrest never resumed offering fostering services. (Submission 141a (Salvation Army) entry for December 1937).

1279 Submission 141a (Salvation Army), entry for July 1945.

This also appeared to involve internal inquiries regarding, and comparison with, the 'girls in Perth' at other institutions, who were receiving financial assistance.[1280] Hillcrest wrote to the Social Service Department, which agreed that pregnant girls were 'unemployable' and therefore eligible to receive the sick benefit.[1281]

8.80 The then Matron of Hillcrest summarised the sick benefits as follows:

- women of 16 years received £0.5 per week
- women of 18 years received £1 per week
- women of 21 years received £1.5 per week.

8.81 At this time, Hillcrest charged £0.5 per week 'maintenance' to the women staying, and paid out the balance to unmarried mothers when they departed.[1282] In February 1946, the Matron of Hillcrest noted the commencement of the 'hospital benefit', which was £0.6 per day.[1283]

8.82 In April 1946 the Matron noted a shortage of staff meant that they were turning away patients. This continued throughout the following months.[1284]

8.83 In 1947 Hillcrest increased its fees. The fees distinguished between married and unmarried mothers (again by using the term 'girls' for unmarried mothers). Fees for girls included £1 per week maintenance, £4.4 per week for ward, and £1.1 per week for theatre.[1285] It was noted that the maintenance would be 'regulated according to their circumstances'.[1286]

8.84 Records from August 1948 note 'quite a number' of unmarried mothers at Hillcrest, and that there were meetings held by senior Salvation Army members with the unmarried mothers and staff each Thursday night.[1287]

8.85 A mother in evidence who stayed at Hillcrest in 1968 was there with an Aboriginal girl who had been delivered by a Department social worker. The mother stated:

> It was not possible to communicate with her, and I often wondered if she had any understanding of why she was where she was and what was to happen to her baby.[1288]

8.86 In 1969, records confirm that Hillcrest was recognised as an 'adoption agency'.[1289]

8.87 At the end of 1974 Hillcrest ceased operations.[1290]

8.88 Available records on Hillcrest provide little information regarding its day-to-day operations and procedures. However, inquiry contributors provided a picture of the usual procedures at Hillcrest by sharing their experiences as unmarried mothers.

1280 Submission 141a (Salvation Army), entry for July 1945.

1281 Submission 141a (Salvation Army), entry for July 1945.

1282 Submission 141a (Salvation Army), entry for July 1945

1283 Submission 141a (Salvation Army), entry for February 1946.

1284 Submission 141a (Salvation Army), entries for April 1946, May 1946, August 1946, September 1946.

1285 Submission 141a (Salvation Army), entry for October 1946.

1286 Submission 141a (Salvation Army), entry for October 1946.

1287 Submission 141a (Salvation Army), entry for August 1947.

1288 Submission 50.

1289 Submission 141a (Salvation Army), letter dated 1969.

1290 Submission 141a (Salvation Army), entry for December 1974.

Most adoptions through Hillcrest were privately arranged

8.89 Most, but not all, of the adoptions through Hillcrest were arranged privately rather than through the Department.

8.90 Private adoptions through institutions were often carried out differently to those arranged through the Department. For example, in 1970 one contributor was told by the Matron at Hillcrest that the Matron's friends wanted to adopt her baby.[1291] While under the new laws of 1970, the Department would still have provided a report regarding this applicant, ultimately the opportunity for that applicant to adopt rather than someone else was at the discretion of the Matron. There was clearly a potential for conflicts of interest and bias on the part of those responsible for deciding who could adopt when adoptions were privately arranged.

8.91 Privately arranged adoptions were also reflected in other parts of the process. Mothers at Hillcrest usually signed consent and necessary paperwork with private solicitors.[1292]

8.92 It is important to note that records for privately arranged adoptions were generally more difficult for contributors to obtain than those for adoptions arranged through the Department. Records were often not kept at all, not properly stored, reported to be damaged in fires and floods, or simply destroyed by the record keeper.

8.93 Further, those with lived experience at Hillcrest gave evidence that they were unable to access all records relevant to the private adoptions it arranged concerning them. The Salvation Army directed contributors to enquire with the Department in relation to their Hillcrest records, but records the Department held were often incomplete.

8.94 The intersection of poor record keeping for privately arranged adoptions and poor record keeping for adoptions involving Hillcrest created considerable difficulty for many contributors and also for the Committee.

FINDING 42

The Hillcrest Maternity Home/Hospital operated by the Salvation Army arranged adoptions in the 20th century.

FINDING 43

The Hillcrest Maternity Home/Hospital operated by the Salvation Army played a significant role in past forced adoption in WA.

Hillcrest separated married and unmarried mothers

8.95 As noted above, Hillcrest provided services for married mothers and unmarried mothers. These 2 groups were kept separate and treated differently. Records from the Salvation Army routinely refer to unmarried mothers as 'girls', 'single girls', or 'pregnant girls', while married women were referred to as 'married women' or 'married patients'.[1293]

8.96 Contributors recalled that, by 1970 if not throughout the operations of Hillcrest, the married mothers were at a separate end of the premises to the unmarried mothers.[1294]

1291 Private individual 15, transcript of evidence.

1292 Private individual 15, transcript of evidence.

1293 For example, Submission 141a (Salvation Army), entry for September 1948.

1294 Private individual 15, transcript of evidence.

Mothers felt forced to remain at the home, and in some cases physically forced to return there

8.97 One mother noted that Hillcrest felt like 'a prison'. This feeling was not necessarily because they would be stopped from leaving by staff.[1295] There was often a level of awareness by mothers that they could leave, but that doing so would be looked down on and against 'unwritten' rules and expectations.

8.98 As considered in paragraphs 5.100 and 7.195, the Matron of Hillcrest forced a frail and unwell mother to return from KEMH, against her will.

8.99 There was also a financial aspect to this possessiveness. The above mother arranged to give birth at KEMH rather than Hillcrest Maternity Hospital in an attempt to retain her child. She described the Matron of Hillcrest as being furious when informed. While a mother was at KEMH, Hillcrest would neither have been able to charge board or hospital fees nor claim her hospital benefit. This mother's experience demonstrated Hillcrest's prioritisation of finances over the wellbeing of unmarried mothers.

Hillcrest's religious governance impacted upon its procedures

8.100 Hillcrest was run by a Christian organisation, and this was reflected in the nature of comments staff made towards mothers. Staff forced mothers to attend religious services, and celebrated 'conversions'.

8.101 Mothers were made to attend religious services, regardless of their faith.

> They made us go to their Sunday night religious service. Whether we wanted to or not, we had to go because we were bad people. They tried to get us to go out at the front to the altar and commit to our sin. They tried to "save us from sin".[1296]

> This attitude of our fall from grace was reinforced by their demand that we attend the Sunday evening prayers. At such time we were directed to come out of our seat to the front, face the audience and Officer. We were told to say we had sinned and asked and be forgiven 'for our sin'. They would then give us a blessing and absolve us from our heinous crime of becoming pregnant. But we were still pregnant! I never went out the front! I was so indignant. How dare they humiliate us like that![1297]

> Every Sunday we would always have to go to chapel. Before we went out, we were made to go to chapel. I have been brought up in religion myself, but it was like you have to go because you have done this—you have to atone for what you have done.[1298]

8.102 The Salvation Army record for Hillcrest in 1952 noted 'very encouraging times in girl meeting' and a number of 'conversions'.[1299]

8.103 It is problematic that when providing a paid service to unmarried mothers, this was seen by the Salvation Army as an opportunity to impose religious practices upon them and convert them to Christianity.

1295 Private individual 20, transcript of evidence.

1296 Private individual 20, transcript of evidence.

1297 Submission 60.

1298 Private individual 15, transcript of evidence.

1299 Submission 141a (Salvation Army), entry for May 1952.

Mothers at Hillcrest endured shaming and abuse

8.104 Contributors described the unpleasant treatment that they received from staff at Hillcrest, including general staff and often the Matron herself.

> Hillcrest was an uninviting and unhappy place.[1300]

> The attitude of Salvation Army Officers at Hillcrest towards the unmarried mothers-to-be who stayed there until after their baby was born – was - you have committed a grievous sin and you must pay for it.[1301]

> You were made to feel guilty in every aspect of the time there.[1302]

8.105 The attitude and treatment towards unmarried mothers was often tied to religious views and ideals. As considered in paragraph 4.89, a mother who had been raped was accused by the Matron of 'seducing' her rapist and told that she was a sinner in need of punishment.

> Matron … had accused me, of seducing the father of my daughter and of how she had labelled me as a sinner in need of punishment. She also said that she strongly suspected that the father of my baby was a victim of my manipulation and scheming.[1303]

8.106 This mother was also told that:

> …losing a baby was the price the unmarried mother must pay for her sinfulness.[1304]

8.107 As considered in paragraph 4.89, one mother was verbally abused when she told the Matron that she intended to keep her child.

8.108 Other unmarried mothers were subjected to similar comments promoting the adoption of their children and suggesting they had nothing to offer a child themselves.[1305]

8.109 The abuse from some staff members was often coupled with disinterest from others. There was no support or counselling provided to mothers.

> Once I was by myself and I was crying to myself, and the nurse came along and said, "What is the matter?" I said, "While I have got the baby in me, it is my baby. As soon as the baby is born, someone will take it off me." She said, "Do not tell me your troubles." That was my counselling. It was the only counselling I ever got.[1306]

8.110 Mothers were also regularly visited by a worker from the Department to discuss the adoption of their children.[1307]

The location of accommodation for unmarried mothers was insensitive

8.111 One mother recalled the dormitory used to house unmarried mothers was directly underneath the labour ward.

1300 Submission 50.

1301 Submission 60.

1302 Private individual 20, transcript of evidence.

1303 Submission 50.

1304 Submission 50.

1305 Submission 50; Submission 60; Private individual 15, transcript of evidence; Private individual 20, transcript of evidence; Submission 104.

1306 Private individual 20, transcript of evidence.

1307 Submission 104.

> Every night (nearly) we were woken by the sounds from above of women in labour. It was unnerving, knowing that we would have to go through that ordeal ourselves. It didn't help to be reminded of it every night.
>
> I feel it was completely wrong of Hillcrest to pile on that extra degree of pain. One nurse remarked: "You girls are so quiet when you go into labour". We were quiet because we knew that the girls in the ward below could hear every sound.[1308]

Unpaid work by unmarried mothers

8.112 Unmarried mothers were paying a fee to Hillcrest, but were also doing work for which they were not paid.[1309] Mothers' descriptions reflect that they were treated as free labour by Hillcrest, to provide services for Hillcrest and the married women staying there.

> I was a secretary, but I had to work in the laundry where there was a big brick copper, where all the clothes were washed from the "respectable" married women. We had to pull out these big, heavy metal walls—they were really high—and put the baby clothes on them. Then we would push the tray in and get other doors, say, where the clothes were cleaned and you had to take the clean clothes and fold them. I had to do that all day.[1310]
>
> … While we worked hard every day - we also paid a weekly board. It wasn't as though they 'kept us'. We paid our way. They gained free labour.[1311]
>
> The women all had to do something. One woman had to scrub the floors. She was nine months pregnant and she still had to get down on her hands and knees and scrub the floors.[1312]

8.113 As noted by paragraph 4.95, Hillcrest also used unmarried mothers as 'volunteers' to benefit the Salvation Army. [1313]

8.114 Using unmarried mothers for work and 'volunteering' to benefit the Salvation Army is very problematic in circumstances where records show women were already paying for their stay. Unmarried mothers were also not simply paying for lodging but were paying for lodging specifically as pregnant women. The labour described by some contributors seems completely inconsistent with the level of care that these women required, and were paying for. The Committee's view is that the labour required of unmarried pregnant women at Hillcrest was punitive and exploitative.

8.115 Records from Hillcrest indicate that the financial operation of the institution was monitored closely.[1314] Hillcrest sent money to the Salvation Army, and the historic record book indicates that making a significant contribution was of considerable importance to the Matron.[1315]

8.116 One contributor noted that staff were reasonably good to them, and 'it was a money making business and supplying a demand'.[1316] It appears likely that using the free labour of unmarried mothers was considered more attractive to Hillcrest than the alternative of hiring

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1308 Private individual 20, answers to questions on notice.

1309 Submission 50; Submission 104; Private individual 15, transcript of evidence; Private individual 20, transcript of evidence.

1310 Private individual 20, transcript of evidence.

1311 Submission 60.

1312 Private individual 20, transcript of evidence.

1313 Private individual 15, transcript of evidence.

1314 Submission 141a (Salvation Army).

1315 For example, Submission 141a (Salvation Army), entry for October 1925, October 1932, October 1940.

1316 Submission 104.

labourers to do that work and increasing the fees charged to mothers. This focus on finances seemed to be prioritised over the wellbeing of mothers staying at the institution.

FINDING 44

Unmarried mothers at Hillcrest Maternity Home/Hospital were made to work and complete unpaid labour, despite paying for their stay. In some cases this labour was clearly contrary to the health needs of the mothers.

FINDING 45

The Salvation Army financially benefited from the unpaid labour of unmarried mothers at Hillcrest Maternity Home.

Medical treatment

8.117 Contributors indicated misconduct in relation to the medical treatment of mothers throughout their experience at Hillcrest. This included inadequate medical checks in the period before birth, neglect when in need of medical attention and treatment, and administration of unknown drugs and medications following birth.

8.118 More than one contributor noted that they were not given regular medical checks by doctors during their stay at Hillcrest.[1317] At the time, this was not the norm. When one mother attended KEMH for her birth, staff were puzzled that she had not seen a doctor for the 6 weeks prior.[1318]

8.119 Mothers recalled being left alone when in need of medical attention during labour. One mother was left on a bed, with no sheets or pillow, no water or food, and no visits from staff, from about 7.00am until about 11.00pm. She was then examined and sent urgently to KEMH to birth.[1319]

8.120 Another mother was left alone in a room with other women who had given birth, and was unattended while vomiting until another women left her bed to find a midwife.[1320] The midwife then put her in the labour room, gave her a hand bell, and told her to ring it when ready to birth.

> There were things that I read, that the midwife had said she checked, but most of the time I was just there on my own with this bell, and I was so scared.[1321]

8.121 One mother recalled that when she returned to Hillcrest after her birth, she had taken 'a lot of medication', but did not know what drugs had been given to her.[1322]

FINDING 46

Staff at Hillcrest Maternity Home/Hospital neglected the medical needs of unmarried mothers. This included failing to provide check-ups in the period prior to birth, and leaving mothers unattended and neglected for extended periods during labour.

1317 Submission 50; Private individual 20, transcript of evidence.

1318 Submission 50.

1319 Submission 60.

1320 Private individual 15, transcript of evidence.

1321 Private individual 15, transcript of evidence.

1322 Submission 50.

Mothers were separated from their babies and prevented from visiting them

8.122 Some contributors noted that their babies were removed from them immediately following birth.[1323] The babies were put in a nursery with a glass window but locked doors.[1324] Unmarried mothers were able to stand outside and see the babies, knowing theirs was likely inside, but unable to visit or hold them.

Records were poorly kept

8.123 This inquiry identified many issues regarding records, and they are discussed fully in Chapter 12. Issues with records were particularly prevalent in relation to Hillcrest. As described above, multiple contributors commented that the records they had been able to obtain regarding their experiences at Hillcrest were limited, or that they had been unable to obtain them and were told they had been destroyed.[1325]

8.124 One contributor also described an incident in which she was taken to KEMH by ambulance, and noted this was not in her record.[1326] Her records indicated a midwife claimed to have checked on her, when this was not the case and she had been left unattended for an extended period of time.[1327] Misrepresenting the care and treatment of patients at Hillcrest was not just improper. It also carried significant risk of causing harm to patients that were owed a duty of care.

8.125 If the Salvation Army had taken more appropriate care with its Hillcrest records, not just at the time of these events but in the years that followed, many contributors would be in a position to obtain their records. Aside from being able to inform themselves about their own experiences, this would also allow contributors to provide more evidence to this inquiry. The Committee is of the view that the lack of available evidence benefited the Salvation Army, by limiting the findings available to the Committee.

FINDING 47

The Salvation Army failed to adequately maintain its records for Hillcrest Maternity Home/Hospital.

FINDING 48

Hillcrest Maternity Home/Hospital engaged in pressure and coercion practices which caused unmarried mothers to agree to the adoption of their children.

RECOMMENDATION 2

The Salvation Army commit to participating in a redress scheme in recognition of their involvement in past forced adoption in WA.

Sisters of Mercy

8.126 The Sisters of Mercy operated many institutions in WA in the 20th century. These included:

[1323] Private individual 15, transcript of evidence.

[1324] Private individual 15, transcript of evidence.

[1325] Private individual 15, transcript of evidence; Private individual 4, transcript of evidence.

[1326] Private individual 15, transcript of evidence.

[1327] Private individual 15, transcript of evidence.

- St Anne's Nursing Home (1937–1958), St Anne's Maternity Home (1958–1982), and St Anne's Mercy Hospital (1982–1997)
- St Gerard's Hospital (1944–1972)
- St Joseph's Girls' Orphanage (1901–1971) and St Vincent's Foundling Home (1914–1971), St Margaret's Hospital (1918–1971)
- Catherine McAuley Centre (1971–1997) and Mercy Community Services (Inc) (1997–2002).

8.127 St Anne's Maternity Home was a home for unmarried mothers operating between 1958 and 1982. It was located in Mount Lawley. It also operated a hospital on the premises, and was sometimes referred to as St Anne's Maternity Hospital. The hospital had 75 beds and at one time delivered as many babies each month as KEMH.[1328] It also operated a midwifery training school.[1329] In 1961 a new convent was opened on the premises.[1330] In 1964 there was a new pre-natal clinic added.[1331] In 1970 a new 100-bed general hospital opened.[1332] Most contributors in evidence who encountered the Sisters of Mercy gave birth at the hospital at St Anne's.[1333]

8.128 St Gerard's Hospital was a maternity hospital for unmarried mothers located in Subiaco. It operated from 1944 until 1972.[1334] When it opened, it had room for about 16 mothers.[1335] The intention was to assist unmarried mothers to 'rehabilitate' by providing medical care in private.[1336]

8.129 The Sisters of Mercy also operated St Joseph's Girls' Orphanage and St Vincent's Foundling Home, until 1971. St Vincent's Foundling Centre had an extension called St Margaret's Hostel, also known as St Margaret's Home for Pregnant Girls. In 1971, these institutions closed and the premises became the Catherine McAuley Centre. The Catherine McAuley Centre was also known as the Catherine McAuley Centre for Unwed Mothers. Only a few inquiry contributors had experiences at these places or at St Gerard's as pregnant women or infants.

8.130 The Sisters of Mercy's published history indicates that, at first, no payment was taken from women at these institutions.[1337] It appears that at some point fees began to be charged for unmarried mothers. The timing and amount of any fees could not be found in available records, but was likely tied to the introduction of government benefits, including the hospital benefit.

8.131 Adoptions carried out through the institutions operated by the Sisters of Mercy were generally arranged privately.[1338] In many cases, unmarried mothers were referred to institutions run by the Sisters of Mercy through family connections or (Catholic) GPs.[1339]

1328 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, Vanguard Press, 1992, p 307.

1329 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 307.

1330 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 311.

1331 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 310.

1332 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 311.

1333 Submission 82; Submission 7.

1334 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 362.

1335 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 362.

1336 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 362.

1337 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 311.

1338 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 310.

1339 Submission 82; Private individual 16, transcript of evidence; Submission 52; Submission 7; Submission 52.

Current operations

8.132 In 2011, St Gerard's and St John of God Hospital Mount Lawley joined the current congregation known as the Institute of Sisters of Mercy of Australia and Papua New Guinea (ISMAPNG).

8.133 In 1997, the Catherine McAuley Centre became Mercy Community Services (Inc). In 2002, the Sisters of Mercy transferred ownership of MercyCare to lay ownership. The organisation now known as MercyCare is therefore no longer operated by the Sisters of Mercy or ISMAPNG.

Unmarried mothers performed unpaid labour at Sisters of Mercy institutions

8.134 In relation to St Anne's, a history of the Sisters of Mercy in WA noted that 'it was felt better not to ask any [women] to do domestic work, as in some other institutions such young women and girls became a source of cheap labour'.[1340] However, the same text later notes that unmarried mothers at St Margaret's worked in the laundry.[1341] Multiple contributors referred to an expectation that they would work while at St Margaret's, or later at Catherine McAuley.

8.135 Unmarried mothers staying at Catherine McAuley were made to care for the orphans and foster children at St Joseph's and St Vincent's, and to make blankets. [1342]

> Our dormitory was dismal, and each day we were made to work, taking care of orphans and foster children, all the while knowing that our own babies would end up in similar circumstances.[1343] [1970]

8.136 A mother who stayed at St Anne's Maternity Home recalled making baby blankets and nighties for the nursery.[1344]

8.137 It is disappointing that the Sisters of Mercy began from a position of intentionally avoiding using the women in their care as a source of cheap labour, but later chose to do so. While the timing and value of the fees charged to women for their stay could not be ascertained from available records, it did appear that these fees merely subsidised the service and were not intended to cover full costs, or produce a profit. Use of unmarried mothers in laundry services has been considered in relation to other institutions. This was often a demanding form of labour and not appropriate for pregnant women.

8.138 Using unmarried mothers to care for children from St Joseph's and St Vincent's was also inconsistent with a mindset that unmarried mothers were not fit to care for their own children.

FINDING 49

Women at institutions operated by the Sisters of Mercy including St Margaret's Hostel, the Catherine McAuley Centre, and St Anne's Maternity Home were made to perform unpaid labour, which included caring for children who were not their own.

[1340] A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 310.

[1341] A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 356.

[1342] Submission 52; Submission 56; Submission 19; Private individual 16, transcript of evidence.

[1343] Submission 56.

[1344] Submission 52.

Unmarried mothers received discriminatory treatment

8.139 Mothers described cold treatment by the staff at St Anne's Maternity Hospital, St Margaret's, and the Catherine McAuley Centre.[1345] This included unkind comments from staff.[1346]

8.140 Unmarried mothers were treated differently to married mothers, as demonstrated clearly in the experience of one contributor.

> The day came when I was admitted to St. Anne's to be induced. I really had no idea what was going on. I just did as I was told. A seemingly kind nun was escorting me to a ward. She had her arm around my shoulder and said, "You are such a tiny little thing. Is your husband very big?" "I don't have a husband," I replied. She immediately removed her arm and her manner towards me changed completely.[1347]

8.141 The unmarried mother who had her second child removed by St Anne's staff and demanded its return also described being treated differently once it became clear that her child would not be adopted.[1348]

The attitude towards unmarried mothers extended to their medical treatment

8.142 Contributors described doctors as being angry or impatient.[1349] One mother recalled a doctor giving her stitches without local anaesthetic, telling her it was what she deserved.[1350]

8.143 Multiple mothers suffered infections after their birth.[1351] One mother attended a different hospital for treatment, where she overheard a nurse commenting that her doctor at St Annes was 'a bit of a butcher'.[1352]

Unmarried mothers were given drugs, including sedatives, without their knowledge or consent

8.144 Mothers who gave birth at St Anne's often had no recollection of at least one part of the process, whether it was the delivery of their child, the period following, or the signing of paperwork by them. One mother later recognised a yellow pill she had been given at St Anne's Maternity Home as Valium.[1353] It appears likely from the evidence available that mothers were routinely given medication, including sedatives, without explanation or consent, or medical necessity.

Sisters were involved in arranging adoptions

8.145 It was also common for the adoption of children through Sisters of Mercy institutions to be arranged by the hospitals (St Gerard's and St Anne's),[1354] rather than through the Department. Unlike other institutions, mothers did not describe being visited by the Department while at St Anne's, St Margaret's, or the Catherine McAuley Centre.

8.146 During a hearing, a representative of the Sisters of Mercy stated that their involvement with unmarried pregnant women was limited to medical matters. However, a mother in evidence

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1345 Private individual 16, transcript of evidence.

1346 As considered in Chapter 4.

1347 Submission 7.

1348 Submission 52.

1349 Submission 82.

1350 Submission 52.

1351 Submission 82; Submission 7.

1352 Submission 7.

1353 Submission 6.

1354 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, p 310.

described the senior Sister knowing the names of the people who had adopted her child.[1355] Another recalled the same Sister and a solicitor waking her to sign consent documents at St Anne's 2 days after birth and after she had been haemorrhaging in the night. She felt weak and intimidated.[1356] The same Sister also had the authority to return a withheld baby to the mother who refused to leave without it.[1357] One contributor noted the aunt of their adoptive parent was a senior Sister of Mercy and was told she played a 'big part' in their adoption.[1358]

8.147 Mothers often attended private solicitors, or were visited by them at the hospital, to sign their consent and other documents.[1359] Multiple mothers signed consent documents within 7 days of birth, could not recall the specifics of signing documents,[1360] or could not recall signing the documents at all. It is likely that these mothers were under the influence of drugs, including sedatives, when they signed these documents.

FINDING 50

St Anne's Maternity Home/Hospital operated by the Sisters of Mercy (now Institute of Sisters of Mercy Australia and Papua New Guinea) arranged adoptions in the 20th century.

Children were removed from mothers at birth

8.148 When unmarried mothers gave birth at St Anne's, their children were removed almost immediately. There was no opportunity to see their child or to hold them.[1361] Some mothers asked for information, and were given minimal information or refused completely,[1362] such as the mother at paragraph 5.59 above, who was told her child was a boy, had no hair, and 'that's all you need to know'.[1363]

8.149 One mother noted that her child was removed immediately at birth. She did not know what she looked like, or if she was healthy. She had not been asked what she wished to name her child, and the child had instead been given a name chosen by the nuns.[1364]

8.150 Mothers were also routinely denied access to their child when they asked.[1365] In 1970, one mother at St Anne's was taken by the senior Sister to see a baby 5 days after birth, but stopped from touching. She later realised that it was not her baby.[1366]

Access to records was handled by an individual with direct involvement in forced adoption practices

8.151 For a significant period of time, access to records from Sisters of Mercy institutions was determined by an individual who had been directly involved in the forced adoption practices of St Anne's. The views of contributors regarding her role in accessing their records varied. Some were left with a positive impression and felt that she genuinely attempted to assist

1355 Submission 52.

1356 Submission 151.

1357 Submission 52a.

1358 Submission 99d.

1359 Submission 43; Submission 109, Private individual 15, transcript of evidence; Private individual 20, transcript of evidence.

1360 Submission 82.

1361 Submission 7; Submission 43.

1362 Submission 7.

1363 Submission 7.

1364 Submission 43.

1365 For example, Submission 82.

1366 Submission 151.

them in obtaining their records. Others expressed serious concerns that records about their matter had been destroyed by her.

8.152 The Committee recognises that it can be beneficial to have staff with knowledge of practices (and the records that would have been created in the course of those practices) involved in providing access to information and records. This could no doubt be helpful when navigating the poorly stored and organised records (which appears to have been common among all institutions at the time). However, having this individual deal with those affected by forced adoption, and in many cases determine what (if any) access they had to information and records, was extremely inappropriate. Any individual involved in forced adoption practices should not be placed in a position of power or authority over those affected by forced adoption.

Records for multiple institutions are now located interstate

8.153 The addition of St Gerard's and St John of God to the ISMAPNG reportedly resulted in the records of those institutions being sent interstate and held by that body in New South Wales. While it is positive that various records from those institutions were preserved by the Sisters of Mercy and ISMAPNG, the movement of those records resulted in confusion and difficulty for those affected by forced adoption. It is appropriate that records from historic institutions operating within WA remain within this state.

FINDING 51

Institutions operated by the Sisters of Mercy (now Institute of Sisters of Mercy Australia and Papua New Guinea) engaged in pressure and coercion practices which caused unmarried mothers to agree to the adoption of their children.

RECOMMENDATION 3

Institute of Sisters of Mercy Australia and Papua New Guinea commit to participating in a redress scheme in recognition of their involvement in past forced adoption in WA.

Private hospitals

8.154 Hospitals (both public and private) were integral to the forced adoption process. The birth of a child was the start of their legal recognition as a person, distinct from their mother. It was also the earliest available opportunity for a child to be separated from their mother. Removing a child as soon as possible after birth minimised the opportunity for a mother to keep her child.

8.155 Many private hospitals involved in forced adoption operated in tandem with unmarried mothers' institutions. Where these private hospitals were operated by the same governing entities, such as the Salvation Army or Sisters of Mercy, the processes have been considered within that section of this chapter.

8.156 The South Perth Community Centre Hospital was one private hospital involved in past forced adoption which was not operated as part of a home for unmarried mothers. The South Perth Community Centre Hospital was a private, not for profit, community run hospital. It operated a maternity suite from 1959 to 1980. In 2003 it changed name to South Perth Hospital Inc.

8.157 Contributors who gave birth at this hospital were sent by Ngala,[1367] or attended directly after meeting with the Child Welfare Department.[1368]

8.158 Multiple practices at South Perth Community Centre Hospital appeared similar to those seen at other hospitals, including public hospitals. Mothers were left alone and unattended during labour.[1369] Their children were removed immediately at birth and they were not permitted to see or hold them.[1370] Although it seems from available records that adoptions were less common at that hospital, staff appeared to be familiar with the expected practice for adoptions, and this included immediate removal of children.

8.159 One mother's records noted that her child was in the care of South Perth Community Centre Hospital in the days following birth, when she herself had returned to Ngala.

8.160 This mother's records also indicate that the Birth Information Paper was signed by someone at the hospital as a witness. However, the Birth Information Paper does not appear to have been signed by the mother, or dated.[1371] Providing a witness signature when the document had not been signed was at best careless, but represents a focus on efficiency even where this involved shortcuts.

GPs and private health practitioners

8.161 General practitioners were involved in multiple past forced adoptions the Committee reviewed.

8.162 As noted in Chapter 3, by 1963 the majority of adoptions were privately arranged, rather than arranged through the Department. These adoptions were 'arranged' by different entities. Some were arranged directly between adoptive parents and institutions such as Ngala, Hillcrest, or St Anne's. Others were arranged through doctors and private lawyers.

8.163 When unmarried women realised they were pregnant, many were referred to a doctor, or attended upon their usual doctor. In many cases, this doctor referred them to an institution for unmarried mothers,[1372] or proceeded to arrange themselves for the child to be adopted. This frequently involved matching the pregnant woman to other patients who were seeking to adopt, and vice versa. An adopted person submitted:

> I now know that the adoption was arranged through my natural mother's and adopted mother's GP. He confirmed in a letter to me years later when I was searching for my natural family that he had arranged quite a few adoptions.[1373]

8.164 Doctors were regularly seen to be involved in arrangements for adoptions which occurred through St Anne's. One contributor was referred into the adoption system by her obstetric gynaecologist.[1374]

8.165 Where doctors were involved in 'arranging' an adoption, the mother was often unaware of this until much later.[1375] These mothers often continued to attend upon their doctors with the understanding that their needs were being prioritised. However, this was not the case.

1367 Private individual 23, transcript of evidence.

1368 Submission 20.

1369 Private individual 21, tabled paper 1.

1370 Private individual 21, tabled paper 1. Private individual 23, transcript of evidence.

1371 Private individual 23, tabled paper 1.

1372 Submission 82; Submission 7.

1373 Submission 14.

1374 Submission 151.

1375 Submission 59.

Their information was being provided to third parties, without their knowledge or consent. The Committee notes that from 1970 onwards, arranging adoptions in this way likely amounted to an offence under the provisions of the Adoption of Children Act.

8.166 In many cases, doctors also reinforced the treatment that mothers had received from institutions. This included cold and clinical treatment,[1376] and undermining mothers who struggled with the adoption of their child after leaving the hospital.[1377]

8.167 The WA Branch of the Royal Australian and New Zealand College of Psychiatrists (RANZCP WA) consulted senior members and conducted research but found no evidence of WA psychiatrists playing a role in past forced adoption.[1378] However, one mother shared her experience being referred for psychiatric treatment after leaving the hospital in 1973.[1379] Her emotions at the loss of her child and what had happened to her were not considered with empathy. Instead, she was medicated, and this began a cycle of prescriptions until she was later cleared of any psychiatric illness. Another psychiatrist responded similarly when treating an unmarried mother shortly after birth in 1968. She admitted the mother to the Mount Hospital as her patient, where she was medicated and then treated as mentally ill for a year, as described from paragraph 5.139.[1380]

8.168 In some cases, mothers described doctors as 'kind', and usually the only kind treatment they received.[1381]

Legal practitioners

8.169 It is difficult to determine exactly what role legal practitioners played in forced adoption. Their role varied significantly between cases. In many cases where an adoption was arranged through the Department, there was no evidence of any direct involvement by a solicitor. Where an adoption was arranged privately, lawyers in evidence were involved in the following ways:

- preparing court documents, and
- attending upon the mother for her to sign necessary documents, including the consent to adoption.

8.170 The names of certain solicitors, and certain law firms, appeared repeatedly across the submissions received. Those solicitors appear to have been involved in multiple adoption matters. It also seems likely that, having handled one adoption application successfully, they were open to taking on more matters of that nature, were considered more knowledgeable in the area than other solicitors (who had perhaps not handled any adoption applications), and received referrals for further work on adoption matters (from both previous clients and other solicitors unwilling or unable to conduct that work themselves). In the case of St Anne's, the same lawyer (and sometimes, doctors) were seen to work with the institution in multiple cases and were confirmed to be Catholic, creating a religious connection.

8.171 Some mothers signed their documents with legal practitioners. The legal practitioner in those matters witnessed the mother's signature. However, many mothers did not attend a private solicitor for this purpose. It was common for mothers to recall attending the Department or Supreme Court to sign their documents. The person at the Supreme Court

[1376] Submission 7.

[1377] Submission 6.

[1378] Submission 139.

[1379] Submission 6.

[1380] Submission 37.

[1381] Submission 82; Submission 108.

appeared to be a public servant at the Courts. It was not clear whether the person at the Department was a lawyer, or simply an officer from the Department who was a Justice of the Peace.

8.172 Chapter 7 considered the Department's involvement of solicitors and non-solicitors in the process of arranging adoptions and signing documents.

8.173 Certain conduct that related specifically to private solicitors included the following:

- Multiple mothers referred to private solicitors visiting them in the hospital or in their home to sign the paperwork.[1382] This included occasions where the mother was under the influence of medication including sedatives, or was quite unwell soon after birth.[1383]
- The experiences of mothers with those solicitors varied significantly. Some stated they were simply provided with the paperwork and signed it,[1384] while others recalled comments by the solicitor during this meeting.[1385]
- Solicitors did not consistently inform mothers regarding revocation of consent. While some mothers were informed,[1386] others were not.[1387]
- Some mothers recalled comments by the solicitors which were inappropriate, including warnings against trying to contact the adoptive parents or locate their child, and advice that certain behaviour could get them into trouble.[1388]
- Some mothers were given misinformation while the solicitor was present, for example, when signing a consent form a mother was told that she could claim her child back within 30 days.[1389] The solicitor did not correct this.

8.174 Much of the above conduct is more egregious when committed by a solicitor rather than a Justice of the Peace or layperson. Solicitors were members of a profession expected to appreciate the concepts of consent, capacity, conflicts of interest, and the importance of following processes, including processes stipulated by law.

8.175 Where private solicitors provided their services, it can be reasonably expected that they charged a fee for doing so. There was no clear evidence of the usual amount charged for work of this nature.

8.176 The involvement of private solicitors in adoption processes also brings to light the inherent disadvantages of mothers throughout this process. None of the mothers who contributed to this inquiry referred to having their own solicitor or independent legal advice for any part of the process. While they were made to navigate the process without legal assistance, those on the other side of the process, including adoptive parents, the Department, and institutions, often had access to lawyers and to legal advice.

1382 Submission 109; Private individual 15, transcript of evidence.

1383 Submission 109; Submission 151.

1384 Submission 109.

1385 Submission 43.

1386 Private individual 15, transcript of evidence.

1387 Submission 109.

1388 Submission 43.

1389 Submission 151.

CHAPTER 9
Ongoing impacts of separation

9.1 A large part of the evidence received for this inquiry relates to the difficult, debilitating and ongoing impacts of forced adoption. This chapter examines that evidence. It covers adopted people's childhood experiences and what happened to mothers after their children were taken for adoption. The chapter also looks at continuing impacts for both parties as they live with separation in their adult lives to this day. These impacts uniquely affect specific subgroups, including First Nations families, as well as other family members.

> The impact of past adoption practices on people's lives is incorrigible and has lifelong repercussions.
>
> - Adoption Research Counselling Service, submission 113

9.2 The volume and variety of experiences cannot be fully captured in this report. The Committee encourages interested readers to access the public evidence to gain a deeper understanding of the hardships those affected have endured, and continue to face.

9.3 Evidence from academics, professional associations and services that support forced adoption clients attest to an observable and evidenced pattern of impacts experienced by mothers and adopted people.[1390]

9.4 As discussed in Chapter 5, the initial separation of infants and mothers caused immediate trauma for both parties, and that trauma continues to be lived today, and to reverberate through families.

9.5 The evidence captures the cycle of trauma that began with separation experiences at birth or after giving birth, and engulfed many contributors throughout their lives.

9.6 Interpersonal trauma experiences increase the risk of future such traumas.[1391] Following their separation, an alarming number of mothers and adopted people in evidence were abused in their intimate relationships, family contexts or beyond.

9.7 Forced adoption practices continue to deeply impact a significant number of West Australians. One contributor provided some simple maths, multiplying children forcibly adopted by each of their parents, grandparents, partners, subsequent children and grandchildren. The well-made point is that for every adult who spoke about being adopted, there were parents who did not get to see, touch, or raise their child, and vice versa. And the effect continues to multiply through other children born to those parents, to those of people adopted, and beyond.

1390 See: Submission 84 (Adoption Jigsaw WA); Submission 91 (Australian Psychological Society); Submission 113 (Adoption Research and Counselling Service); Submission 139 (The Royal Australian and New Zealand College of Psychiatrists, WA Branch); I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023; J Newbould, Manager and Counsellor, and K de Cinque, Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023; Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1391 Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, p 107.

Growing up adopted

Experiences within adoptive families varied

9.8 One adopted person submitted that, for her and others like her, adoption was a 'shoddy lottery'.[1392] In the evidence received, the treatment of children within adoptive families ranged from nurturing and loving to horrifically abusive.

Positive experiences

9.9 Some adopted people described childhoods that were happy, safe and full of opportunities.[1393]

> its important to acknowledge the sincere and deep love, nurture, and best intentions that my adoptive parents had at the commencement of adopting me. There is no denying that the love and care they had for me as the adopted child – was real – as if I was their own child.[1394]

> My mother, bless her heart, to them it did not make any difference that I was adopted as opposed to her son who is naturally born and my sister who was again adopted. We were all treated equally and with love, so it did not make any difference to me. They were my adoptive parents and that is how it continued. They still loved me as their own.[1395]

9.10 Mothers were relieved when they later learnt that their children had been well cared and provided for.[1396]

9.11 Some had a secure home for a while, but were left destabilised when their adoptive parents separated, or one died, suicided, or became mentally unwell. An Aboriginal adopted person submitted:

> I do want to acknowledge I was lucky to be given to a beautiful Mum and Dad. But even that was short lived with my Mum having cancer and dying at home when I was eight. It made me feel even more isolated, alone, unstable, insecure[1397]

9.12 When circumstances changed, adopted people in evidence were brought up in single parent or step-families, by foster-parents, or by other relatives.[1398] Some were sent away to boarding school.[1399]

Cultural complexities

9.13 Some adopted people were brought up in a different culture or with a different language or religion than that of their parents, including being adopted by migrant families or their adoptive family returning or migrating overseas.[1400]

1392 Private individual 18, transcript of evidence.

1393 For example: Submission 12; Submission 13; Submission 97; Private individual 3, transcript of evidence.

1394 Submission 48.

1395 Private individual 8, transcript of evidence.

1396 For example: Submission 103; Submission 124a; Private individual 14, transcript of evidence; Private individual 21, transcript of evidence.

1397 Submission 93. See also: Submission 32.

1398 For example: Submission 144; Submission 148; Private individual 24, transcript of evidence.

1399 For example: Submission 17; Submission 123.

1400 For example: Submission 117; Submission 144.

9.14 One non-Aboriginal submitter described being adopted by a non-Aboriginal mother, an Aboriginal father and 2 Aboriginal brothers (see paragraph 6.161). This further complicated their sense of identity and deepened their sense of not-belonging: 'So two families, and a part of neither'.[1401]

9.15 The unique experiences of First Nations families are discussed below, from paragraph 9.137.

9.16 Cultural differences between original and adoptive families heightened adopted people's sense of estrangement growing up. For many, it also went on to further complicate family reunification.

Negative experiences and abuse

9.17 Many adopted people had negative experiences growing up in adopted families.[1402]

9.18 Some adopted people had developmental needs as children but were not supported or provided any intervention.[1403] Some adoptive parents failed to provide for their adopted child's basic needs, or otherwise treated them with cruelty.[1404] One submitter described:

> I was eventually 'bought' by a good catholic family as most were and with dreadful allergies and eczema tied to my cot hands and feet, splayed, for years with a bottle propped in my mouth.[1405]

9.19 Some contributors explained that their adoptive family was dysfunctional, or that one or more of their adoptive parents was unfit to raise children.[1406] Adopted people recounted growing up with adoptive parents living with addiction or with unmanaged mental illnesses, some of which were diagnosed prior to the adoption.[1407]

9.20 Some adoptive parents never reconciled to not having their own biological children, or did not accept the children they adopted. Adopted children felt punished for not being someone else:

> So, hey girl, your Adopted! For some reason you're not what your Adopted Mother wanted! The hurt and pain, guilt, and shame I felt when I realised that I was the one - thru no real fault, as I had no idea - was why Mum hated me and Dad drew away from me as her paranoia got worse. Everything was my fault in those young years, everything was just hurt and shame and pain and ... To Be Honest ... totally confusing![1408]

9.21 Some adopted people did not receive any warmth as children from their adoptive parents.[1409]

> Growing up, I was not allowed to have feelings. My adoptive parents weren't emotionally available, they were not equipped or had the personal tools to support an adopted child, in the way they needed supporting. How could someone sitting behind a desk, believe that I would be better off being brought up

[1401] Submission 29.

[1402] For example: Submission 104; Submission 88.

[1403] Submission 68.

[1404] For example: Submission 17; Submission 71.

[1405] Submission 17.

[1406] For example: Submission 88; Private individual 15, transcript of evidence; Private individual 24, transcript of evidence.

[1407] For example: Submission 32; Submission 42; Submission 71; Submission 103.

[1408] Submission 103. See also: Submission 72.

[1409] For example: Submission 13.

> by 2 x 10pound poms, rather than with my natural mother, or with my natural father.[1410]

9.22 Adopted people also described other wounds. Some were treated differently to other, non-adopted children in the family. Some lived in homes with a domineering parent and had little say over their young lives.[1411] Some were given domestic duties or made to care for other children with high needs, when biological children in the family were not. Some were not given opportunities through education or individual pursuits.[1412]

9.23 Some adopted children lived with parents who did not have good relationships and some witnessed violence in their homes.[1413] An alarming number of adopted adults provided accounts of the episodic or sustained emotional, physical and/or sexual abuse they endured as children within their adoptive families or in family contexts.[1414] Some of these raw accounts contain no context as to the circumstances surrounding the writer's adoption.[1415] When adopted people told adoptive parents that their adoptive siblings, other relatives, family friends or others were abusing them, they were not believed.[1416]

Early trauma was carried through childhood

9.24 While adverse childhood experiences can happen in any family, and unhappy childhoods can occur within original families, as well as adoptive families in general, there is an added dimension for those forcibly adopted. No matter what their experiences in their adoptive families, adopted people carried the early trauma of their birth, removal, and institutionalisation.

> If I was not adopted, I could have had a hard life. I could have faced painful experiences or abuse. But please consider the following: … There are two wooden huts and each is identical side by side. Imagine they are both set alight in the same manner and left to burn. Now imagine as they both are burning one has gasoline poured all over it. Which hut is going to burn with the most intensity? The one with the additional element of gasoline will do so… - Adoption is like gasoline to the "fire" of life's hardships.[1417]

9.25 Even adopted people who had functional adoptive parents described living with a deficit. An adopted person who was in a regional hospital and in Ngala for over 7 weeks said:

> As a baby, as a child, as a teen, and as an adult, I have always needed more assurance, more love, more compassion.[1418]

9.26 For many people whose adoption was forced, the separation trauma they carried from their infancy compounded negative experiences they had as children. It may also have been a factor in the abuse they were subjected to, as one witnessed posited:

1410 Submission 119.

1411 For example: Submission 46.

1412 For example: Submission 46.

1413 For example: Submission 109;

1414 For example: Submission 1; Submission 17; Submission 42; Submission 46; Submission 53; Submission 71; Submission 103; Submission 119; Submission 120; Submission 134; Submission 148; Submission 149; Submission 152; Private individual 17, transcript of evidence; Private individual 25, transcript of evidence.

1415 For example: Submission 86.

1416 For example: Submission 134; Submission 152; Private individual 25, transcript of evidence.

1417 Submission 152.

1418 Submission 119.

> I believe that being adopted potentially made me more vulnerable as a child, as I had always known I was adopted and I would have already had attachment issues from being removed from my mother at birth, and I developed rejection and abandonment issues early in life from being adopted.[1419]

9.27 The evidence of adopted people also demonstrated that any pain they suffered through childhood was intensified by feeling that they would not be experiencing it were it not for their adoption.

> Hypothetically, let's say I was not adopted, but I was still sexually abused. I would have had to bear the pain of that abuse, yes, but it would have been pain absent of the additional compounding pain via the narrative of "if I wasn't adopted I would not have been here on this path being abused by this person", etc.[1420]

9.28 Others always felt they were missing the childhood meant for them, or that they may have had if they had remained with their parents. For example:

> I would fantasize a lot of different family imagion alot. About being apart of a imagionary family. because I never knew who or where I came from. I would make things up in my head as a child that I was this person that person or belonged to this family on tv or someone else.[1421]

Children in closed adoptions were not always told of their status

9.29 Adopted people described that the fact of their adopted status was either: kept hidden; divulged but never raised again; a forbidden topic; discovered and sat uneasily, or; openly discussed from a young age.[1422] They stated:

> my parents never told me. It was never discussed. Even after they realised—or my adopted mother realised—that I knew, it was a taboo subject.[1423]

> I am very fortunate in the sense that I have always known I was adopted. From my earliest memory is—I cannot remember being told the first time, but I have always known. I am very thankful to my parents for doing that. I can only imagine how hard it would be for someone to learn later in life. So, therefore, being adopted has always been part of my identity. It is part of who I am and something I am comfortable with.[1424]

9.30 Some who were told as children found the information impossible to reconcile. An adopted man submitted:

> To provide an accurate understanding of the impacts that forced adoption has had on me, would require the committee members individually to place themselves as a 6-year-old child, sitting at a dinner table and being told one night that; mum and dad aren't really your mum and dad….you were adopted. Think about that for a moment….you've been living your life as a child and looking at your parents as the

[1419] Private individual 28, transcript of evidence.

[1420] Submission 152.

[1421] Submission 93.

[1422] For example: Submission 112; Submission 148a; Private individual 22, transcript of evidence; Private individual 26, transcript of evidence.

[1423] Private individual 22, transcript of evidence.

[1424] Private individual 13, transcript of evidence.

> only mum and dad who ever existed – and then being told one day that they weren't really your mum and dad, that you weren't really their flesh and blood.[1425]

9.31 Some adopted people discovered they were adopted by accidentally stumbling upon their own adoption papers. The person who submitted the following experience was 15 years old at the time:

> After reading my name on the court document, I sit very still, for a very long time. I was someone else? What? My eyes flick from one name to the other. Nope. Nope. Don't know what that means. I feel breathless and inhale deeply. It's like a fuse has blown in my head. I can't process what those words mean. And I don't.[1426]

9.32 Adopted people were told they were special, or chosen, but this often made them feel different, ashamed of being adopted, or wonder why they were given up, if they were so special.[1427]

> The story they told was special (as a child). I was told that they (mum and dad) couldn't have children, but they were allowed to go into a big room full of babies and pick one out….and of course they chose me. And although this made you feel special at that point in time, it also made you feel insecure, scared, lonely, abandoned and lost. It raised questions from within the mind of a 6-year-old….who are my real parents, where are they, why didn't they want me, there must be something wrong with me, and will I ever find them?[1428]

9.33 As children, adopted people wanted to find, and to find out about, their parents. They described looking, and asking, when they had the opportunity, but their curiosity was often shut down by adoptive parents.

> My journey started early on from the moment I understood what adoption was. From when I was a small child, I would look at people in the shopping centre trying to see someone who might look like me or be from my family. No one teaches you as a child that you will want or need to look for your mother it is innate, it's quite the opposite its denied, it is squashed it is not talked about this part of your life has now been erased and you best forget. Whenever I heard anything about adoption via the news or others, I would soak it up.[1429]

> Even when I turned a teenager I was always troubled. I was always looking its such a hard thing to describe[1430]

> All I ever wanted was to call my birth mum and ask if she could please take me back, but I was told, "No, you can't do that. You're not allowed to find out who your mum is until you're 18."[1431]

Adopted children struggled with belonging, identity, shame and self-worth

9.34 Adopted people gave evidence that they lost their whole families on the day they were born.[1432] Unlike other children who were anchored by a sense of belonging, while growing

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1425 Submission 48.

1426 Submission 112. See also: Submission 2.

1427 For example: Submission 58; Private individual 18, transcript of evidence.

1428 Submission 48.

1429 Submission 58. See also: Submission 32; Submission 48.

1430 Submission 93.

1431 Private individual 28, transcript of evidence.

1432 Submission 110; Private individual 22, transcript of evidence. See also: Submission 95; I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

up they could not take their identity for granted. This often led them to feel lonely, insecure, depressed, anxious, and in some cases to run away or pursue destructive behaviours.[1433] Some began using alcohol and other drugs as children and young people.[1434] Some made suicide attempts in their teens.[1435]

9.35 Despite attempts made by adoption agents to 'match' the physical characteristics of infants with those of prospective adopters, many adopted people in evidence described the difficulty of looking completely different from the rest of their family growing up. The lack of genetic mirroring they experienced caused them pain, and led to confusion:

> it was the dissociation and the disconnect and the constant reminder that you are not who you have been told you are. That does not go away.[1436]

9.36 An adopted person described how as a young child, and before he discovered he was adopted, his subconscious was trying to work out where he fit in through dreams. He wrote:

> It's all part of this sense of ubiquitous otherness I feel, but can't acknowledge or explain.[1437]

9.37 An adopted person explained how she was always seeking her original family:

> As a child I had an innate connection to my biological family I thought about them all my life not just curiosity but a need to know. No one recognises the importance of this fundamental need as a human to have that connection it [is] just there it exists.[1438]

9.38 The secrecy around adoption also led adopted people to internalise shame as children. They absorbed the information that they were adopted as meaning they were unwanted. Some were told not to tell.[1439] Some were made to feel guilty for asking their adoptive parents about their origins.[1440] Still others were mocked if they displayed qualities alien to others in their adoptive family, or bullied by peers throughout their childhoods because they were born to unmarried parents.[1441]

My adoption was kept secret and secrets become shameful; I feel I am less worthy than 'kept' people.

- Name withheld, submission 46

Adopted children feared abandonment and felt they needed to please

9.39 For those who knew, the information that they were adopted made some adopted people believe that they were disposable, and at constant risk of rejection.[1442] To combat that risk, they described feeling they needed to be perfect, to please, and not to disappoint. One

1433 For example: Submission 14; Submission 38; Submission 46; Submission 93; Submission 103; Private individual 10, transcript of evidence; Private individual 28, transcript of evidence.

1434 For example: Submission 120.

1435 Submission 120.

1436 Private individual 26, transcript of evidence.

1437 A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, p 39, in Submission 112.

1438 Submission 58.

1439 Private individual 15, transcript of evidence. See also Submission 57: 'I found myself in a family environment where one just knew that anything to do with the 'A' word was most definitely a no-go zone. I desperately tried to fit in to my family, like my life depended on it, because at a practical and psychological level, my life did depend on it.'

1440 Submission 13.

1441 Submission 1; Submission 110.

1442 For example: Submission 93.

adopted person summated: '[I was] afraid to cause any trouble in case I was moved to another family'.[1443] As a result, some took on responsibilities beyond their years: 'I had the world on my shoulders at an early age'.[1444]

9.40 In addition, as one contributor submitted, telling adopted children that they were lucky, special, or chosen was experienced by them as pressure to feel happy or act grateful.[1445] Many felt unable to express the complex and difficult emotions they experienced growing up as a result of their adoption and so pretended their way through.[1446] One adopted witness spoke of the shock of realising, through therapy as an adult, that she'd grown up wearing rose-coloured glasses on account of being told she was adopted because she was special, but had not truly felt that way deep down.[1447] Another said that this way of being has never left her, stating: 'have been distracting myself from how I truly feel for 49 years.'[1448]

Adoptive parents' infertility placed an additional burden on adopted children

9.41 As discussed in Chapter 6, people who adopted because they were unable to have biological children carried grief that often remained unprocessed as they raised adopted children. An adopted person explained that, while any family can have dysfunction, adoptive families are thus unique:

> The infant/child/teenager/adult is then given the impossible lifelong task to undertake, a task so impossible to fulfill – to be the son (or daughter) to parents who could not have their own son(s) or daughter(s) – and to be thankful for the rest of their lives that they were taken from their own biological parents and placed in a family where there are no genetic links or characteristics and in fact – there is nothing in common at all.[1449]

Mothers with absent children

Mothers experienced trauma, terror, pain, grief, shame, guilt and loss

9.42 As described in Chapter 5, after giving birth and having their children taken for adoption, mothers were expected to carry on with their lives as if nothing had happened. They describe being silenced, continuing to carry shame and guilt, and a 'void' of grief for a child that no one around them was acknowledging they had.[1450] Mothers in evidence have carried trauma and 'disenfranchised' grief from that point forward.[1451] They explained:

> Days stretched into nights, and more nights … never-ending pain. I hated my life, waiting for the pain to go away. It didn't - not for thirty-seven years did it merely abate. It will never go and cannot, ever. I am a mother - I will always be his mother

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1443 Submission 148.

1444 Submission 58.

1445 See also: J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

1446 A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, in Submission 112. See also: Submission 58; I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

1447 Private individual 18, transcript of evidence.

1448 Submission 119.

1449 Submission 48.

1450 For example: Submission 89; Private individual 23, transcript of evidence.

1451 For example: Submission 20; Submission 47; Submission 50; Submission 94; Private individual 15, transcript of evidence. On pathological grief, see Submission 72.

> – one who was separated from my child and told to 'forget about it and get on with your life!'[1452]
>
> I just was not allowed to talk about it, so I had to keep all that grief just locked inside.[1453]
>
> A natural sense of sadness is to be expected any time a major loss occurs in our life and in the normal course of events this grief will gradually diminish. However, the trauma experienced by losing a child to adoption differs to this and is, in fact, unique, in that the grief is for the loss of a child who is still living.[1454]

9.43 Many mothers kept silent about their experiences, as one adopted person testified about his mother:

> she pretty much kept my birth secret. Her family did not want anyone around locally to know, and it became easier, I guess. She said most of her friends did not know, and that is something that she held with her for a very long time. [1455]

9.44 Mothers also spoke about carrying shame, and suffering loss of confidence, worth and self-esteem.[1456]

9.45 In evidence, mothers spoke about the impossibility of having birthed a child whose whereabouts and fate they had no knowledge.[1457] They testified:

> I did not know where my son was—he was out in some space and I could never find him. That is the worst part, not knowing where your child is. Never knowing where they are—that is the worst part.[1458]
>
> It was impossible to ever know if our son was dead or alive, loved and happy, or living in misery or the better home that we were told we could not provide, or anything of his life or fate. … For all I knew he may not have been alive, I may have been grieving for a dead son.[1459]
>
> I spent 12 years of [daughter's Name]'s life, everyday terrified of what her life could be and having no knowledge of whether she had been adopted, whether she was healthy, or even alive or dead.[1460]

Mothers kept wanting and seeking their children

9.46 Mothers explained that, as their children grew up without them, they maintained a psychological relationship with them.[1461] For example:

> not a day went by that I didn't think of my daughter.[1462]

1452 Submission 81.

1453 Private individual 15, transcript of evidence.

1454 Submission 50.

1455 Private individual 8, transcript of evidence.

1456 For example: Submission 43.

1457 Submission 6; Submission 10; Submission 108; Private individual 26, letter of correction.

1458 Private individual 20, transcript of evidence.

1459 Submission 81.

1460 Submission 94.

1461 For example: Submission 33; Submission 70; A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, p 38, pp 42-43, in Submission 112; Private individual 15, transcript of evidence.

1462 Submission 47.

> I desperately missed the daughter I had never seen.[1463]
>
> I thought of my baby every day, was she ok, was she loved, the fear of not knowing only increased the trauma.[1464]
>
> I never forgot her birthday, I imagined what she would look like, what her interests would be, how she had achieved at school, or had she even survived childhood.[1465]
>
> The years, since then have been a succession of silent mournings for our first son. On birthdays, the first day at school, and all those times of joy to share, were miserable. So many times of seeing children, teenagers, and then adults, thinking and wondering if this could be our first son.[1466]

9.47 One mother described several recurring dreams in which she is always trying to get to her child:

> the very worst dream is hearing the never-ending crying of a new-born baby so close by but just beyond my reach; I'm searching trying to find him. Never close enough, and I seem to wander alone for hours, locked in the labour ward unable to get out to comfort my baby. That one will wake me in tears[1467]

9.48 Mothers made numerous inquiries into their children's welfare.[1468] Many described how they continued to search for them as the years passed. For example:

> I used to look at every pram and check if I would recognise my child.[1469]
>
> I looked at children his age for years and years and years thinking I might bump into them.[1470]
>
> I spent many hours studying the microfiche at the State Library, pouring over birth notices. I had a starting list. As the years went by and the child grew, I would put notices in the newspapers. Both in WA and over in the east as I was told that a lot of our babies were shipped over there. Like cargo it sounded. The ads always said "Happy xxth birthday to the daughter I have never seen. Love Mum [postal address]". I hoped that one day she would see it and contact me.[1471]

9.49 Some mothers did eventually connect with their children, but others have not. Contributors submitted:

> I then said to her – "it's me – I'm your son". Her words to me over the phone that instant were "you have made my life"….and then broke down crying. Two weeks later she had flown out from London to meet me and my wife face to face - after her painful years of "never knowing". Never knowing if I was alive, never knowing if I was abused, never knowing if I could walk, talk, see, or hear…those were her

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1463 Submission 50.

1464 Submission 73.

1465 Submission 43.

1466 Submission 109.

1467 Submission 81.

1468 Submission 1b; Submission 22; Submission 37; Submission 47; Submission 82; Submission 109; Private individual 9, transcript of evidence; Private individual 14, transcript of evidence.

1469 Private individual 21, transcript of evidence.

1470 Private individual 25, transcript of evidence.

1471 Submission 108.

> questions throughout her life that never stopped eating away at her…the "never knowing".[1472]
>
> This tragically is the reality for many still today " this not knowing ".[1473]

The negative impact of forced adoption on mothers is onging

9.50 Invariably, mothers stated that their experiences of forced adoption are not something they can ever 'get over'.[1474] Rather, the impacts are deep, continuous and without end.[1475]

> Mothering our infants is an intrinsic, deeply complex and vital part of the female psyche. Cut it off by taking one of our children and we are physically, mentally and emotionally torn apart forever. Young fathers, who supported their pregnant partners and their child, were torn apart too.[1476]
>
> The effects of the adoption on my life was profound and everlasting[1477]
>
> This was 51 years ago , or yesterday, depending upon your point of view.[1478]
>
> My experience is still very hurtful & I am 70 years old.[1479]
>
> Even at my age now (73) I still feel that part of my heart had been taken away.[1480]
>
> It is hard to define the lasting impacts being forced to give up my baby has had. I still end up crying any time I allow myself to talk or think about it, even after 56 years.[1481]
>
> it just changes your whole life. It is not something that happened X number of years ago; it is with you every single day.[1482]

9.51 The impact of forced adoption can also be intensified by reunion, as one mother explained:

> My pain at the loss of my firstborn is ongoing, every day I live with this loss. The pain never ends. The more contact I have with my daughter the more loss I feel. I wasn't there for her first steps, first smile, first steps, first day at school. I could go on and on. Heartbreaking losses.[1483]

9.52 Parents suffer further if they later learn that their child had a negative experience growing up or that the adoptive parents did not stay together or were not who they were led to believe.[1484] For mothers, the trauma they continue to experience is related to losing their babies, but also to the way they were treated at the time.

1472 Submission 48.

1473 Submission 6.

1474 See Private individual 20, transcript of evidence.

1475 Submission 37. See also: Submission 72.

1476 Submission 59.

1477 Submission 47.

1478 Submission 94.

1479 Submission 116a.

1480 Submission 18.

1481 Submission 52.

1482 Private individual 14, transcript of evidence.

1483 Submission 73.

1484 See: Submission 50; Submission 109; Private individual 14, transcript of evidence.

> I have heard many accounts from other unmarried mothers and what emerges from their stories is a process of systemic bullying seeking to harm, intimidate and coerce vulnerable women. Bullying is an ongoing and repeated misuse of power in relationships. Bullying can impact on physical, mental and emotional levels. Some of the effects comprise anxiety, post-traumatic stress disorder, lack of self-esteem, gastric and a plethora of physical issues, relationship issues and addiction to alcohol and drugs, detrimental to academic and vocational achievement. I can attest to the fact that the target of bullying behaviour (in this case the unmarried mother) continues experiencing the consequences of this form of abuse after leaving the location where the abuse occurred.[1485]

Mothers' relationships were and remain affected

9.53 Many mothers submitted evidence as to how their experiences of forced adoption affected their relationships in the years following. Some never entered another partner relationship.[1486] Some struggled through relationships, and others partnered with men who were abusive.[1487] Some were assaulted by non-partners. Women expressed that the trauma and self-hatred they carried from losing their children and being subjected to forced adoption practices made them more vulnerable to future abuse.[1488]

9.54 Some mothers did not have further children.[1489] In relation to his mother, an adopted person explained:

> She did not talk much about the experience when we met later in life because it was so traumatic to her, but she certainly relayed that it impacted her for the rest of her life. She felt belittled. … She was made to feel that she was incapable of raising a child … Those experiences were with [mother's Name] all her life, as you can imagine. She never had any other children. She married a couple of times, but she never had any other children. She just did not think she could go through it again.[1490]

9.55 Others that did have further children found themselves hypervigilant around their infants, babies and children as they grew up, out of fear they would also be taken.[1491] One mother explained that she had a further 2 ex-nuptial children interstate, who she kept:

> I was terrified of losing my children as I was not married to the father. But I had a Mrs. in front of my name, and I believe this prevented my children from being taken from me. [1492]

9.56 Mothers struggled through raising their subsequent children while their firstborns were being raised by others. Some found themselves unable to bond with them due to their trauma. Some experienced post-natal depression, as one mother described:

> After 8 years of marriage I gave birth to a son. The past trauma came back, I sunk into deep depression, I felt I was not fit to care for this child, I still said nothing to

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1485 Submission 50.

1486 Private individual 14, transcript of evidence.

1487 For example: Submission 43; Submission 73; Submission 80.

1488 Submission 6. On 'revictimisation', see: Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, p 107.

1489 See: Submission 59.

1490 Private individual 8, transcript of evidence.

1491 Submission 73; Submission 82; Private individual 23, transcript of evidence.

1492 Submission 73.

> my husband, he knew nothing of my past. I said to my mother "you know what this is about", her reply was to say nothing. [1493]

9.57 As this example illustrates, the messaging women were subjected to around the birth of their first children left a lasting imprint on their confidence as mothers.[1494] One submitter explained that the feeling she was inadequate as a mother continued, as she assumed the roles of grandmother and great-grandmother.[1495]

9.58 Mothers lived with the feeling they were failing their subsequent children:

> My children had to live with a traumatized grieving mother, a mother who could not talk of her distress, loss, and trauma.[1496]

9.59 Some mothers endure similar feelings when they learn of the difficult lives their firstborn children had without them there:

> Hearing about the struggles he had as an adopted child makes me feel like a failure as a mother. I have a sense of helplessness and disempowerment.[1497]

Adults living with family separation

9.60 The negative impacts of forced adoption felt by mothers in the years after they gave birth, and by adopted people as they grew up in other families, continue to the present day. While their experiences differ, there is a symmetry in the way they are affected by their separation for adoption.

Trauma and identity issues play out through adopted people's adulthood

9.61 Beyond their childhood, adopted people explained that they continue feel the effects of early separation trauma to this day.[1498] Like their mothers, many have been diagnosed with PTSD.[1499]

> Adoption is something you never get over no matter how good of a life you have had.[1500]

> I still to this day, suck my thumb. Whenever I am sad or upset, I lay down, on my side and comfort myself. This is how I've learnt to cope with my emotions, on my own, comforting myself, over and over. I have always suffered with nightmares and night terrors, where I would wake myself up, in the middle of the night, screaming out for my mum, this still happens regularly, even today.[1501]

9.62 As well as neonatal trauma, adopted people also feel they have intergenerational trauma from their mother's experiences while they were in utero. One stated:

1493 Submission 43. See also: Submission 7.

1494 Submission 124a. See also: Submission 72.

1495 Submission 109.

1496 Submission 73.

1497 Submission 89.

1498 For example: Submission 2; Submission 17; Submission 35; Submission 46; Submission 58; Submission 110; Submission 117; Submission 123; Submission 148; Private individual 3, transcript of evidence.

1499 For example: Submission 46; Submission 123. See also: Submission 154.

1500 Submission 2.

1501 Submission 119.

> I believe that I have some kind of intergenerational trauma, not just from my current life—that happens—but also what I received from [my mother]. I just want to say that I think it is real.[1502]

9.63 As in their formative years, so too do adopted people wrestle with questions of who they are and where they belong in their adult lives. An adopted person who had a positive experience in her adoptive family explained that, nevertheless, 'this adoption and past unknown history is always lingering'.[1503]

due to the decisions made by our government and communities, I was deprived of the opportunity to know unconditional love, family, connection, belonging and who I am

- Amanda McLennan, submission 38

9.64 Another adoption person explained that she is forever straining to create her origin story:

> there just wasn't anything to tell. I felt different to my peers, in a weird and not special way. I had no story, I was no-one, I was a not a real person. This feeling of not belonging has travelled with me throughout my life, even now with a family of my own. I float in a space of experiencing life from outside, I am an observer of my own life, I do not belong, anywhere or with anyone, because I do not have a continual and lived experience of being connected to my unique creation story and my real family. These vital foundations to one's formation of identity must never be underestimated for their profound importance to the individual.[1504]

9.65 Adopted people need to know their origin story. This includes events between birth and adoption placement.[1505]

> There are 6-8 weeks of my life that are completely unaccounted for[1506]

> adopted people live with enormous gaps in our post-partum timeline. We know very little, if anything of our time between being born and being collected by our adopted parents.[1507]

9.66 Adoption Jigsaw testified that family background information is integral to a sense of belonging and that the lack of it impacts on a stable identity:

> There was some research done in the 1980s whereby Sue Midford looked at genealogical bewilderment, and that is that sense of not knowing who you are, where you fit, where you belong, that, as you grow older, you often realise. People get confused that it is not to do with love. People can absolutely love their kids and kids love their mum and dad, but it is to do with not having their full identity, not being able to answer the most basic of questions: is there a family history of heart disease? So, every time you go to the doctor, if it is a new doctor, you have to say, "I'm adopted", and that makes you feel—it doesn't make you feel—you are different from most people. Recognising that the loss of your biological family is a

1502 Private individual 18, transcript of evidence.

1503 Submission 12.

1504 Submission 110. See also: Submission 58; A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, in Submission 112.

1505 For example: Submission 110; Private individual 12, transcript of evidence; Private individual 22, transcript of evidence. Mothers also want this information – see Private individual 9, transcript of evidence.

1506 Submission 134.

1507 Submission 110.

> trauma then validates the feelings that many people have of not quite fitting in, not quite belonging, not understanding why they are as they are.[1508]

9.67 The importance of records and family reconnection for this purpose is addressed further in Chapter 12.

9.68 Some adopted people explained that while they may have been assured they were chosen to join their adoptive families as infants, they did not qualify as 'real' members when it came to claiming their rights as adults. Examples include being told they should not be upset when their adoptive parent died because they were not their actual parent, difficulty applying for a passport with official documents reflecting their adopted identity, and being excluded from adoptive relatives wills.[1509]

9.69 Adopted people find that neither do they count as part of their original families in certain circumstances. One adopted person stated that she is unable to obtain a passport for the country where her mother holds citizenship, and an Aboriginal adopted person explained that in some respects she finds herself in a no-mans-land in relation to her Aboriginality:

> In my 40's I have applied twice for the Bringing them Home, Stolen generation reparation, only to be told that I did not qualify as I was adopted. This was another huge disappointment. To be told that I was not eligible for any of this, that I was not a part of the Stolen Generation despite what my birth mother had told me when I connected to Jigsaw WA to find my family. … this impacted on my mental health and sense of belonging.[1510]

9.70 The anger and frustration adopted people carry about their own identities is intensified because they had no control over this vital aspect of their lives:

> gratitude is expected to override any questions I have about where I came from, or who I am. It is completely disregarded that to be "chosen" I also had to be discarded. It is completely disregarded that I had no choice, no say in what happened to me. It is completely disregarded that my adoptive parents are the only people in the adoption triad that actually did have a choice and are allowed to control my identity, along with the state. It is completely disregarded that I was someone before adoption, even if that person is long forgotten and is only a record in a dusty archive somewhere. I am not allowed an identity, I merely should be grateful that I wasn't left on the street somewhere and some 'kind' strangers took me in. I am whatever they wanted me to be. I am not me, whoever that actually is.[1511]

9.71 Even something as basic as one's own name is complicated for people who have been adopted:

> My name at birth, 10th August 1971, was Elizabeth Pendleton, the name given to me by my birth mother. The name I never knew I had been given.[1512]

1508 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

1509 Submission 13; Submission 57; Submission 58; Submission 148.

1510 Submission 148.

1511 Submission 134.

1512 Submission 63.

> I had so many names. My birth name was [Name], the hospital called me [Name] and then when I was adopted, I was called [Name]. To find some identity in all of this, I legally changed my name.[1513]

> All adopted people have two birth certificates. The first document is of our authentic identity, I am Lee-anne Joy. The second is a legal fiction which claims my adoptive parents were my biological creators. … 50 years later I am still denied the basic human right and the privilege to a truthful identity.[1514]

> I have 2 names, but I'm not 2 different people. … Adoptees are constantly juggling 2-3 identities at the same time[1515]

> I grew up knowing that I was [Name]; my legal identity was my identity that I was adopted with. That is the kind of post against which I stick all the bits of my life. I do not feel that I have a fractured personality, but what I have is a fractured identity, if you like. As I grow older and more connected to other people, I realise that there is another part of my life that belongs to my biological life, and that is around my birth identity of [other Name]. It is weird, because it is like there is this other person who is not really me, so I feel a bit split—not in a personality sense, but in an identity sense, if you catch my meaning. It was not really until I anticipated the birth of my first child that it really came home to me that I was not a whole person.[1516]

Late discovery

9.72 Some adopted people grew up and lived years of their adult lives never knowing they were adopted. One 50-year-old submitter, born in 1971, realised in 2022 that she was adopted. She said:

> Your brother is adopted. You are adopted. Your grandparents knew. Your cousins knew. Your uncle and aunts knew. Friends of your family knew. The people you grew up with knew. Your parents lied to you for 50 years. In fact, my entire family lied to me. No one ever told me the truth. The State Government of Western Australia knew. Even now, almost 15 months into discovery, it still takes my breath away. Everyone lied to me.[1517]

9.73 Relationships Australia WA told the Committee that late discovery brings up specific problems, as explained in the following box.

[1513] Submission 29.

[1514] Submission 110.

[1515] Submission 119.

[1516] Private individual 6, transcript of evidence.

[1517] Submission 63. See also: Submission 75; Submission 103; Submission 112.

Case study: adults who find out they are adopted

"In our experience, there have been many people who have had late discoveries. This includes people who found out that they were adopted at the funerals of their parent or when going through their deceased parent's paperwork or personal belongings. Increasingly people are also discovering though DNA testing and family history tracing.

Many people report a spiralling into an anxious or depressive state, as they are struggling with persistent thoughts and questions. This can build and become overwhelming, especially if the person or people who held the answers or information are deceased or no longer have capacity to recall and discuss.

We often hear sentiments expressed around trust and identity, as many people begin to question if other information they have about themselves can be trusted. Their relationships are challenged and we often hear people describe that 'their entire life has been a lie'.

The discovery of an adoption later in life, has been observed as being an absolutely devastating and life-altering revelation that appears to be poorly understood by the people in the adoptee's support network. Nothing has changed, yet everything has changed. Adopted people are often under significant pressure from family and friends to suppress their responses to this revelation to protect their adopted parents and maintain the equilibrium of the family system.

Parallel with this, the people we have worked with have expressed their reality that the revelation means that any love given or received with their adoptive parents now felt enacted under false pretences and so is questioned. If the adopted parents are deceased when this discovery is made, the adopted person is left to try and reevaluate those relationships with no explanation and no answers. Grief, confusion, rage, and loss are the dominant emotions felt. Adopted people then have the arduous task of reconstructing a life narrative where there are many unknowns that need to be incorporated."

[Source: Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024]

9.74 For late discoverers, obtaining information and records pertaining to their adoption is an urgent need. Timeframes for accessing records are discussed in Chapter 12.

Adopted people feel unwanted and that they do not belong

9.75 As they often did in childhood, many adopted people continue to feel out of place, and a lack of 'belongingness'.[1518]

> Genetic mirroring is taken for granted by those surrounded by it. But adoptees face life without the affirmation of people who share similar physical, personality and psychological traits. How can we believe we're okay if no one else is like us?[1519]

> I am expendable to the families I am connected to I belong to no one expect to the children whom I gave birth to they are my only true family.[1520]

> The community holds a strong belief in blood relationships. If people find out I'm adopted their first question is always "have you met your real family?". I do not know what real family is supposed to be, however the context in which the

[1518] Submission 58.

[1519] A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, p 214, in Submission 112.

[1520] Submission 58.

> question is posed suggests the community only sees blood connections as 'real family'[1521]
>
> I've always felt like an outsider in my own home[1522]
>
> I have my birth mother's family, I have my birth father's family, and I have my adoptive family. 3 families, and I do NOT FIT in with any of them. I am constantly struggling to find my place in this world. [1523]

9.76 Adopted people as adults felt constrained by their adoptive families when presented with opportunities to discover their origins:

> I chose not to rock the boat, to continue to appease everyone else and not do what I wanted, and what my heart longed for- to find out where in the world I fitted.[1524]

9.77 Adopted people continue to believe they were not wanted, impacting both them and their original families:

> This hideous lie, which they thought would never be uncovered because of closed adoption, continues to undermine my life and destroy the very fabric of the life of my grown up daughter. She cannot come to terms with being abandoned. Can you blame her? She is caught up in the deliberately manufactured myth and propaganda of the day, as her adoptive parents are—that unmarried mothers did not want their babies and gave them away to strangers.[1525]
>
> I just could not understand how anyone could give up a child. I had bought that narrative that was in society at the time that my mother did not want me. I felt that acutely, and I still feel at times that I am just dispensable.[1526]

9.78 Feelings of being unwanted affect adopted people's confidence, self-esteem, and self-worth as adults.[1527]

> I have a sense inside myself even to this day, after all these years, that if I'd been a better baby, a better person on the inside – I would not have been discarded. I feel this pressure to be as good as I can every day. But it comes with a "knowing" that I'm not ever going to be good enough, loveable enough because if I had been, I would not have been given away.[1528]

9.79 Adopted people also reported continuing to be 'gaslit' by others telling them they should feel grateful for having been adopted.[1529]

1521 Submission 134.

1522 Submission 119.

1523 Submission 119.

1524 Submission 13.

1525 Submission 59.

1526 Private individual 22, transcript of evidence. See also: Private individual 30, transcript of evidence.

1527 Submission 13; Submission 57; Submission 110; Submission 112; Submission 119; Private individual 22, transcript of evidence.

1528 Submission 14.

1529 See also: Submission 110; Submission 149.

Some mothers experience alienation

9.80 Mothers too continue to battle with their self-esteem and the feeling that they are not good enough.[1530] Some explained that they find it very difficult to trust, and described a general feeling of alienation.

> This changes you internally. You are separate from society, and I am happy with that. I am happy to remain separate; I do not want to be a part of a society that does this kind of thing.[1531]

Forced adoption experiences impact on adopted people's relationships

9.81 In parallel with the experiences of their mothers, adopted people reported finding it hard to trust other people, and a preference for keeping to themselves, their own families, or finding company in nature and with animals.[1532] Some never married.[1533] Many in evidence described maladaptive attachment styles, successive unsuitable relationships and intimate partners who were abusive.[1534]

> I did not have a secure attachment with my birth mother or anyone- because the first 51 days I was alone at Ngala. … I have always felt confused about relationships because of the attachment trauma I experienced at birth.[1535]

> I was unable to maintain many friendships due to taking rejection so hard and what I thought was betrayal.[1536]

> my insecurities of being abandoned again mar my relationship with my husband and the people I love. Is it weird that I detached from things that get old, sick or start to deteriorate as a self-preservation strategy. Others must view me as being heartless, but I can't endure the hurt.[1537]

9.82 Some adopted women birthed their own children. Similar to many mothers, they found themselves anxious and hyper-vigilant when giving birth and accessing their newborns, lest they be taken as they themselves were taken. Some experienced post-natal depression.[1538]

9.83 Adopted people also described the difficulty of raising their own families while simultaneously trying to deal with the part of them that felt abandoned as an infant:

> We are grown adults, many of us are now parents, to children, who are the second generation to be unfairly burdened with the consequences of their parents' displacement from their biological families.[1539]

Both parties suffer estrangement from those who raised them

9.84 In adult life, both mothers and adopted people described how their relationships with parents or adoptive parents became untenable because of their forced adoption experiences.

1530 For example: Submission 43; Submission 82.

1531 Private individual 14, transcript of evidence.

1532 For example: Submission 20; Submission 29; Submission 58; Submission 117; Submission 134; Submission 148.

1533 For example: Submission 20; Submission 119.

1534 For example: Submission 29; 58; Submission 103; Submission 119; Submission 134; Private individual 4, transcript of evidence; Private individual 17, transcript of evidence; Private individual 28, transcript of evidence.

1535 Submission 120.

1536 Submission 58.

1537 Submission 45.

1538 For example: Submission 46; Submission 123; Private individual 22, transcript of evidence.

1539 Submission 110.

For some mothers, their own parents could not acknowledge that they had let them down or were not there to defend them when most needed. Adopted people explained that their relationship with adoptive parents floundered. Vital information had been kept hidden from them and they could not reconcile their disparate understandings of the situation. One witness explained:

> She has no empathy for my mother giving up a child and giving it to her because she believes in ownership. Once she got me, that was ownership. You try to say to her, "Can you imagine if [biological daughter's name] was ripped out of your arms?" She cannot. Different time. We were doing the right thing, we were being godly, we were looking after a child that was unwanted.[1540]

Both parties consider themselves damaged because of their experiences

9.85 As a result of carrying the trauma of forced adoption for so many years, adopted people and mothers in evidence both framed themselves as irrevocably damaged.[1541] They continue to struggle with self-worth, and to suffer mental health issues, including grief, loss, trauma, PTSD, anxiety, depression, addiction, self-harm, and suicidality.[1542] Some manage to function alongside these burdens, while for others that is less the case.

I believe my adoption was the rocket fuel for my substance abuse. … So many years of my life were wasted.

- Kimmi Overend, submission 119

9.86 A mother submitted:

> I am a damaged and disconnected person, even through my work as a social worker in child protection, mental health and Aboriginal health I continue to behave as remote and separate from these relationships, but also use my experience to assist and support people going through hardships.[1543]

9.87 Adopted people testified:

> I will never be the person that I would have been had it not been for this archaic and abhorrent practice. It has destroyed my life.[1544]
>
> The impact of separation from the mother on infants and their brain development is well documented and I will not recount it now because it is simply too upsetting for me. Suffice to say, this experience damaged the core of my being and shaped

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1540 Private individual 4, transcript of evidence. See also: Submission 112.

1541 For example: Submission 20; Submission 41; Submission 50; Submission 93; Submission 123. See also: Submission 80.

1542 On grief, loss, depression and anxiety in mothers, see: Submission 52; Submission 59; Submission 82; Submission 89; Submission 94; Submission 115; Private individual 15, transcript of evidence; Private individual 27, transcript of evidence.

On depression and anxiety in adopted people, see: Submission 14; Submission 20; Submission 39; Submission 42; Submission 46; Submission 93; Submission 103.

On addiction in mothers, see: Submission 18; Private individual 23, transcript of evidence.

On addiction in adopted people, see: Submission 58; Submission 93; Submission 112; A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, in Submission 112; Submission 117; Submission 119; Submission 120; Private individual 5, transcript of evidence; Private individual 15, transcript of evidence; Private individual 28, transcript of evidence.

On self-harm in adopted people, see A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, in Submission 112.

1543 Submission 148.

1544 Submission 29.

> the child and the teenager and the man that I would become, and I loathed all of them. Throw in the disinhibitory effects of drugs and alcohol, and I spent most of my 20s unsuccessfully trying to wipe myself from the face of the earth. Many other adoptees were not so lucky.[1545]

> when you don't feel "worthy" and when you've constantly failed in life (through my own eyes) and feel that you don't belong or fit in anywhere from such an early age – it becomes part of your blueprint, your hardwiring. To re-route that blueprint and hard wiring is a very deep and dark place to venture….but one that I had to do - or risk giving in to the darker thoughts that often plague the adoptive person's mind – that it would be easier if I didn't wake up.[1546]

9.88 The evidence reveals that both mothers and adopted people considered or attempted committing suicide, and that some attempts succeeded.[1547] Adopted people stated that even as adults, they are vulnerable to abuse.[1548] The impacts of forced separation remain severe, and not all have survived them.

9.89 In support of her petition calling for this inquiry, Jennifer McRae submitted:

> When compared to their non-FAE [forced adoption era] counterparts, survivors of forced adoption are four times more likely to experience disorders of; chronic pain, inflammatory diseases, attachment, personality, depression, anxiety, Complex - PTSD, self-harm, and suicide. International research has also identified that adopted people are more likely to endure chronic family estrangements, homelessness, criminal incarceration, and complex addiction issues. In West Australia there is an absence of research with which to better understand the impacts of the FAE and to offer evidenced based, quality support services.[1549]

9.90 Research is discussed in this report in Chapter 11.

Shame silenced and crippled both adopted people and mothers

9.91 As this report has depicted, both mothers and adopted people carry profound and persistent shame as a result of feeling that they were responsible for losing their child or, for the latter, that they were not worth keeping.[1550] Both groups conveyed they hid the truth about their experience for many years. One adopted person stated: 'I have always been someone's dirty little secret.'[1551]

9.92 So too did both adopted people and mothers describe 'waking up' later in their adult lives: adopted people to the realisation that their mothers wanted them, and mothers to the fact that their babies were taken from them against their will.[1552]

1545 Private individual 17, transcript of evidence.

1546 Submission 48 (ellipses in original).

1547 On suicide and suicidality, see: Submission 6; Submission 39; Submission 42; Submission 48; Submission 112; A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, in Submission 112; Submission 117; Private individual 28, transcript of evidence.

1548 Submission 117.

1549 J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023. See also: M Keyes, S Malone, A Sharma et al, 'Risk of Suicide Attempt in Adopted and Nonadopted Offspring', *Pediatrics*, 2013, 132)4):639-646, cited in Submission 112.

1550 For example: Submission 50; Submission 52; Submission 73; Submission 109.

1551 Private individual 10, transcript of evidence.

1552 For example: Submission 5; Submission 20; Submission 82; Submission 112.

> I thought when I was married that it allowed me to have children, but all it did was increase the agony because I realised then that is when the penny dropped. I thought this is wrong. Nobody else should be bringing up my children.[1553]

> I am feeling—they call it coming out of the fog, when you start to wake up about what happens to adopted kids.[1554]

9.93 For many in evidence this knowledge is hard to reconcile. Contributors described the work required to continually process their experiences, and to incorporate new information as it becomes available. The Adoption Research and Counselling Service attested that some women were brainwashed so successfully that they have not, and may not ever, come to such conclusions:

> The mothers who held on to this belief of equating loving their child to giving them up find it difficult to allow themselves to express grief as they have survived losing their child through believing it was their decision based on love.[1555]

9.94 Some adopted people remain unaware of the circumstances that led to their adoption, or that they were wanted by their mothers.

Disenfranchised grief affects both mothers and adopted people

9.95 Mothers experience disenfranchised grief for the children they never knew, and adopted people mourn the upbringing they never had with the family they never met. They explained:

> Now adults, many adoptees have lived a life that was not of their choosing, permanently living with disenfranchised grief and the debilitating legacy of pre-verbal trauma caused by the rupture of the maternal-child bond.[1556]

> I lost everything the day I was born. Taken from my mother without even being held by her, taken from my grandparents and extended family. Even my name was taken. I live with an always present, intense feeling of loss. Grief I cannot put into words the grief I feel at the loss of the relationship with my mother. Grief at what my life could have been with her. The unconditional love she has for me that I am only experiencing as an adult. I feel I have not and cannot reach my full potential because of the trauma I carry. Disenfranchised grief as no one truly understands the depth of loss I have experienced in being taken from my mother.[1557]

Forced adoption objectified mothers and adopted people

9.96 Both mothers and adopted people described feeling reduced as a result of their separation through forced adoption practice. Mothers described being dehumanised and exploited as mere 'breeders, incubators' or 'forced surrogates'.[1558] One told the Committee: 'We were just like a bitch that just had a litter'.[1559]

1553 Private individual 14, transcript of evidence.

1554 Private individual 10, transcript of evidence.

1555 Submission 113.

1556 Submission 110. See also: Submission 46; Submission 92.

1557 Submission 46.

1558 Submission 6.

1559 Private individual 9, transcript of evidence.

9.97 On the other hand, adopted people feel commodified by their adoption. They said:

> Once you're adopted - it's as if you're "owned" by the adopting family.[1560]
>
> The adoption fee was forty dollars. I cost forty dollars.[1561]
>
> I was a private paid for / sold adoption … A greedy transaction that others benefitted from, either by means of payment in cash or a baby.[1562]
>
> I was not an object for the government of Western Australia or Ngala to gift on behalf of one mother to another.[1563]
>
> [My adoptive mother] failed to see that I wasn't a puppy or a kitten that could be taken and put with another family and just become them. The question is what separates us from the animals?[1564]

Pain and anger are constants for some mothers and adopted people

9.98 Overwhelmingly, adopted people and mothers expressed they carry ever-present pain and anger at what was done to them, their powerlessness to change it and the ramifications which continue to reveal themselves.[1565]

9.99 A mother expressed:

> I have to live with what happened and accept that these debilitating emotions and reactions will accompany me for the rest of my life. What I cannot accept is the perpetuation of the lie that my baby was unwanted and given away.[1566]

9.100 A person adopted in 1948 submitted: 'I'm now 75 and still hurting by it all and want to know my history.'[1567] Other adopted people revealed:

> pain, anger, and heartache will always be with me[1568]
>
> Adoption isn't about the experience of being placed in an alternative family, it's a constant, profound and lifelong experience of processing the loss of your family of origin. The experience of being adopted is a continuous loss that does not lessen over time. At each life stage, it is waiting for you to confront[1569]
>
> I am hoping that I can come to terms with what was forced upon me, a life I did not have control over. … a lifetime of feeling resentful that I was placed in this position will not go away with an apology.[1570]

1560 Submission 14.

1561 A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, p 206, in Submission 112.

1562 Submission 13.

1563 Submission 110.

1564 Submission 58. See also: Submission 149.

1565 For example: Submission 21; Submission 43; A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, in Submission 112; Private individual 22, transcript of evidence.

1566 Submission 59.

1567 Submission 12.

1568 Submission 103.

1569 Submission 57.

1570 Submission 13.

> Adopted people are the only party within the social construct of adoption to live their entire life 'adopted' and within the confines of an adoption order (contract) which we never gave consent to.[1571]

> I hate that I'm to this day legally considered to be the child of my adopted parents. THEY ARE NOT NOR HAVE THEY EVER BEEN my parents. Yes, they legally owned me, fed me, clothed me, raised me – but they aren't my parents.[1572]

> I never asked to be adopted. I never asked to be placed with new parents. I never wanted to lose access to my American heritage.[1573]

> What other contract exists in the world under these conditions? It is akin to slavery. I am not allowed to use my original birth certificate because I might create a false identity. The irony is that the false identity was created for me and that false identity legally binds me.[1574]

9.101 For adopted people unaware of adoption during adolescence, there is the additional sense of concealment and unjust treatment. The realisation that those closest to them have kept the information secret is often devastating.[1575]

> I have no doubt that you loved me. I always felt that I was loved. But you did not love me enough to tell me the truth, and that is the most hurtful thing; that I was going to continue living my life.[1576]

9.102 While some adopted people seek to discharge their adoptions, not all are able to re-establish a connection to their original families.[1577] A mother explained:

> Even when you meet your child, you have lost all those years. He was born, and he was 28 when I met him. I lost all those years. You never get them back again; it is all gone. [1578]

9.103 The difficulty of family reunification is addressed in Chapter 13.

Confusion and questions plague adopted people and mothers

9.104 Both adopted people and mothers expressed confusion over their experiences, and want answers to many questions that so far have not been provided to them.[1579] Adopted people described:

> My feelings around adoption are increasingly confused and difficult to communicate. I believe they are starting to impact my day-to-day life[1580]

1571 Submission 110.

1572 Submission 14.

1573 Submission 63.

1574 Submission 46.

1575 H Riley, 'The late discovery of adoptive status', *Family Relationships Quarterly* (Australian Institute of Family Studies), 2008 (7):13-15, in Submission 63.

1576 Submission 63.

1577 On discharging adoption, see: Submission 14; Submission 20; Submission 33; Submission 46; Submission 90; Submission 92; Submission 112; Submission 113; Submission 125; Submission 128; Private individual 3, transcript of evidence; I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

1578 Private individual 20, transcript of evidence.

1579 For example: Submission 93; Submission 103; Submission 110.

1580 Submission 134.

> I want to know who made the decision to take me from my parents who could've loved me and wanted me who just needed a little bit of support[1581]

9.105 They have also gone through confusion in the process of trying to find their fathers, which can be a long and complicated process with many false starts, wrong leads and dead ends.[1582]

9.106 In search of clarity, some mothers and adopted people have gone on to become advocates and researchers in the field.[1583] One mother explained: 'I had to investigate how this big con job happen'.[1584]

Adopted people suffer from what they do not know about their family

9.107 Just as mothers suffered and still suffer not knowing the fate of their children, adopted people also stated that not knowing anything about their parents and original family was and remains a constant source of anger and pain. They submitted:

> Every single day of every single day of my life I've thought about my birth mother, every single day of every single day of my life I've thought about my birth father. And every single day of every single day of my life I think about loss grief sadness and abandonment. I am empty inside. I am angry. I feel ripped off.[1585]

> Not being able to find out, to know or to be able to freely talk about one of the most basic of human rights - who are your biological parents – has caused so much trauma (anger, frustration, mistrust, guilt, and confusion) that it has inadvertently been carried throughout my life.[1586]

> Could you please add, I don't know if my parents are even still alive.[1587]

Mothers and adopted people are at medical risk

9.108 Mothers and services supporting them explained how the trauma stemming from their forced adoption experiences means many do not trust doctors, nurses and hospitals. They do not present for medical attention when in need.[1588]

9.109 Adopted people are also at medical risk due to having an incomplete or inaccurate picture of their genetic history. Some continue to act under the belief that they carry the genes of their adoptive parents. Others do not know what hereditary conditions or diseases might apply to them. This can be a constant cause of anxiety and fury, as one adopted person depicted:

> living a life without medical history, often obsessing if my biological family have a history of cancer, cardiovascular disease, cognitive impairment, mental health illness, do they have autoimmune disorders like me? - so many questions and no answers. It makes me feel angry and powerless. Those responsible for my position

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1581 Submission 149.

1582 See: Submission 123; Private individual 28, transcript of evidence.

1583 See: Submission 63; Submission 110; Submission 112; Private individual 14, transcript of evidence. See also: Submission 72.

1584 Private individual 14, transcript of evidence.

1585 Submission 119.

1586 Submission 48.

1587 Submission 149.

1588 For example: Submission 59; Submission 51; Submission 81.

> in life don't care about me. If you cared you'd arrange gene testing along with counselling to support.[1589]

DES concerns

9.110 Many contributors raised concerns that they do not know, and have been unable to find out, whether they themselves or their mothers were given synthetic hormones in the form of diethylstilboestrol (DES) as a lactation suppressant after birth. As discussed from paragraph 5.65, this drug used in Australia was withdrawn once its connection to breast and other cancers became known.

9.111 To better understand the potential risks for those who experienced forced adoption, the Committee consulted with gynaecologist Dr Ross Pagano, who headed the DES Follow-Up Clinic at the Royal Women's Hospital in Melbourne for 35 years. Dr Pagano explained that the established risks of DES exposure apply to mothers who were given the drug while pregnant to prevent miscarriage, and their female descendants. Importantly, when administered post-partum to suppress lactation, the same risks do not apply. Dr Pagano's explanation is reproduced in the box below, and the full transcript is available online.

Whether risks are associated with DES given to mothers after birth

"[Y]ou are looking at mothers who were given it in terms of suppression of lactation and that would have had no effect on them and no effect on their offspring, obviously. …

[T]he mothers who took it [to prevent miscarriage] have got an increased risk of breast cancer very late in life. You have got to remember that it was taken when they were pregnant, and when they were pregnant, their own oestrogen levels were very high, so the increase in breast cancer is most likely a combination of the fact that they had high oestrogen levels in their body due to pregnancy and they were given extra oestrogen. But when it was given dual status to suppress lactation in those cases, then their oestrogen level in their body was very, very low so that they could produce milk, you see. If, for example, you give a woman who is breastfeeding and you give her oestrogen—like, you put her on the pill—her milk will dry up immediately. So, I would say then that the risks that were associated with giving DES to mothers in terms of subsequent breast cancer when it was given during the pregnancy you cannot then equate to say that the risk is going to be the same in those where it was given after the pregnancy, i.e., when they were about to breastfeed. There is no sort of study on that, but theoretically their risk should be no higher than anyone's."[1590]

[Source: Dr Ross Pagano, gynaecologist, briefing transcript of evidence, 14 February 2024]

Both parties deal with trauma triggers

9.112 Both mothers and adopted people described how the trauma of their forced adoption experiences invades their daily lives.

> Some days are good and some days are not. Triggers are everywhere and you just don't know when you will be set off.[1591]

1589 Submission 45. For health issues stemming from adoption, see Submission 57.

1590 The Committee received commentary on Dr Pagano's evidence as follows: 'Carcinogenic potency without any known safe level is an important consideration that has gone unmentioned by Dr Pagano regarding the question of possible health risks with lactation suppression usage. The same consideration should apply to the question of health risks to babies ingesting DES in breast milk.' (Carol Devine, DES Action NSW, email, 6 July 2024; see also Carol Devine, DES Action NSW, email, 16 July 2024.) No evidence on breastfeeding after administration of DES as a lactation suppressant was received.

1591 Submission 63.

9.113 In evidence, mothers and adopted people spoke of the annual torment of birthdays. For mothers, this marks the day their children were taken from them; for many adopted people, the day is not one of celebration, but rather of 'grief and despair':

> My daughter's birthday remains the most traumatic day of my calendar year.[1592]

> As a child and as an adult one of the most marked triggers has been around my birthday. I cannot celebrate it no matter how hard I try. I didn't realise growing up what it was all about, why did I become upset why did not enjoy it why was it always a disappointment. As an adult it was the same and I did come to recognise I was going through grief … it was the time that I lost my mother and brother simultaneously[1593]

> This is what adoption does to people, it constantly steals what should be moments of joy from you.[1594]

9.114 Rituals around Mother's Day, Father's Day and funerals are also problematic for those forcibly adopted, and their original families.[1595]

9.115 Adopted people endure jokes at their expense and other 'microagressions' due to the general perception that adoption is a positive thing and adopted people are lucky.[1596] Mothers also described the slights that may hide in everyday interactions:

> I honestly do not know what could be coming around the corner, you know. Sometimes you are at a family get together and someone says something innocently and it cuts you to ribbons and then you suffer for days[1597]

9.116 Like mothers, adopted people find significant life events such as the birth of their own children or grandchildren triggers their most difficult feelings and experiences.

> [After receiving my adoption records] I pushed aside those strong feelings of rejection and just got on with my life … But when my child was born … and when I held my baby in my arms, it was like that realisation came crashing in on me that this was the only person I had ever known for whom I had a biological connection. As I said before, my child had that connection with me. We were all we had to connect one another to an unknown history. It was really disturbing, because in a rush, I could not reconcile the feeling of love and utter awe at holding my own child in my arms with the feeling of rejection from my own mother. It was as if it happened to somebody else; it could not possibly have happened to me. It is a dream; it is unreal. There is a sense of disconnectedness to it.[1598]

> Then, becoming a grandmother was also difficult. I remember when my grandson was born, he is nearly three now, my son sent me a video of him and he is just a newborn and my son is talking and his eyes are following my son's voice, and I thought: that baby knows his parents, and it just kind of brought it all back, what I missed out on and what my mother missed out on.[1599]

1592 Submission 124a. See also: Submission 70.

1593 Submission 58. See also: Submission 110; Submission 123; J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023.

1594 Submission 110. See also: Submission 57.

1595 See: Submission 57.

1596 Submission 110.

1597 Private individual 24, transcript of evidence.

1598 Private individual 6, transcript of evidence. See also: Submission 123.

1599 Private individual 22, transcript of evidence.

9.117 Interactions with institutions, medical professionals and others in authority are common triggers for those who have lived forced adoption. The WA Branch of the Australian Psychological Society submitted:

> Training can assist clinical and non-clinical service providers to be aware of the many ways in which forced adoption policies and practices continue to reverberate through the lives of clients they may encounter and how these issues may impact them differently. Even seemingly routine and innocuous situations associated with the provision of health, and other non-clinical services, may be experienced as triggering and re-traumatising[1600]

9.118 An adopted person implored:

> Do you have any idea what it is like to be asked by medical professionals "what is your medical history?" and when the answer "I'm adopted, I don't know" is given, they just move on as if the original question didn't matter? It does matter! I am a health professional and the frustration of not knowing my health history, or what the risks there are in my genetics, choices I could or should make based on knowledge is a right others have that I and my children have been denied. Do you also know what it is like when there are health issues evident in my children, to have people say, "that must be your side of the family" and not be able to defend myself? That every undesirable attribute must be from my side of the family? It may be said in jest, however it is yet another constant reminder that I am aimlessly existing in this world with no knowledge as to where I fit in or belong. It is a very lonely existence.[1601]

Impacts get worse with time

9.119 In

> This situation continues to take its toll on me and my family. Its tentacles reach into every aspect of my life. As I am getting older, the impact is becoming greater.
>
> - Name withheld, submission 46

evidence, mothers and adopted people consistently state that time is not a healer when it comes to their experiences of forced adoption. Conversely, the impacts they feel worsen as they age. For some this is linked to subsequent life events and their expanding yet incomplete families.[1602] Others describe a more general increasingly negative impact:

> There is a collective and excruciating pain body shared by the victims of past adoption practice. This pain body is acted out in our relationships and continues to blight our lives Many women have lost their ability to feel and to connect because they continue to live in fear, shame and humiliation. A deeply rooted and all pervading mistrust stalks the background of their lives. Mothers and their children, who were unable to tolerate the pain and injustice, have committed suicide. Subsequent generations continue to suffer as well. In those decades, we as young,

[1600] Submission 91.

[1601] Submission 13.

[1602] For example: Private individual 24, transcript of evidence.

> frightened, vulnerable mothers were exposed to the actions of people who took the meaning of —human out of the words —human-being.[1603]
>
> As time goes by, you see different times of your life and different modes of your own changing, of growing older, and understanding things from different perspectives. It does not get easier. It gets a damn sight harder.[1604]
>
> it is not possible to just go along to a psychologist and say, "I've lost a child to adoption and I can't cope anymore because of the pain." This is documented, and she gets worse with time, not better. It is not a grief. It does not go away.[1605]

Forced adoption affects health and broader life outcomes

9.120 Because of the connection between mental and physical health, those with lived experience also described a range of negative general health impacts. One mother suffered severe migraines from the day she was separated from her child until the day they were reunited.[1606] Others described the adverse effects of trauma, stress and anxiety on their sleep and general functioning.[1607]

9.121 For contributors, forced adoption has had repercussions on their careers, incomes and security:

> My ability to work has been dramatically affected. I often cannot concentrate, cannot bear to be around noise and feel overwhelmed most of the time. … I feel I have not and cannot reach my full potential because of the trauma I carry.[1608]

9.122 Some adopted people in evidence submitted that they were or are currently homeless.[1609]

There is no resolution for forced adoption

9.123 Those who lived forced adoption reiterated that there is no repair possible for the damage done to their lives.[1610] Despite the story sold to them at the time, adoption had deep and enduring negative impacts for both mothers and adopted people.

there are no happy endings in this story

- Carmen Burdett, submission 82

> The trauma and shame caused by my first experience with motherhood was to shatter my life. The happy-ever-after narrative promoted by the social workers turned out not to be true.[1611]

Other family members are also impacted by forced adoption

9.124 Evidence from family members of mothers and adopted people revealed their own experiences of living with the legacy of forced adoption.

1603 Submission 59.

1604 Private individual 24, transcript of evidence.

1605 Private individual 14, transcript of evidence.

1606 Private individual 8, transcript of evidence.

1607 For example: Submission 10; Submission 93; Submission 128; Private individual 27, transcript of evidence.

1608 Submission 46.

1609 Submission 17; Submission 93.

1610 Submission 43; Submission 82.

1611 Submission 124a.

9.125 As described above, supportive parents and siblings of mothers and fathers were also disempowered in relation to the forced adoption of their grandchildren, nieces and nephews.[1612]

9.126 The Committee did not receive evidence from fathers who later discovered they were parents to an adopted child; however, it is aware that these experiences are relevant to WA.[1613] Two fathers who stayed in partnerships with the mothers of their children, had subsequent children, and lived experiences of grief and reunion alongside them made submissions. They and their partners attest that forced adoption has manifested for them as fathers in distress, brokenness, loss, depression and trauma.[1614]

9.127 Fathers also described the impact of forced adoption as ongoing, and compounding with time:

> I have tried to support my wife in her patches of traumatic returning memories. There have been times when she has sort help, with those memories, some of which I have shared with her. I have my own struggle with all that has happened and I'm haunted. This continues to savage my peace of mind.
>
> ...
>
> I will say that I have felt little relief yet, an expanding loss, as my family grows. Seeing the separation and recognizing the lost years and the wholeness of our family. I agonize every time I reflect on what has happened. I was left out in the cold by all authorities. Not informed of any financial support and was robbed of making any decisions or actions that could have saved the adoption of my son. [1615]

9.128 A mother explained the weight carried by those who live with mothers and adopted people:

> There needs to be more focus and professional support for not only those children removed through forced adoption practices – but also for their spouses and their own children – who have stood by them, who have suffered so often in silence but essentially have been the anchors and the pillars to some very emotionally unstable and insecure human beings – as a direct result of forced adoption practices. Their mental health, their story, their hurt and their pain is as much a part of these issues as it is for the adopted individual themselves. They are the heroes – they are the ones that we love, they are the ones that suffer in silence as so often we build up our walls, so we don't get hurt. Sometimes those walls are too high to bring down and sometimes if they do come down – there's no one left on the other side - because there's been too much hurt and pain from the someone that they simply wanted to love.[1616]

9.129 Forced adoption continues to ripple through the families of mothers and adopted people as intergenerational trauma.[1617]

1612 For example: Submission 8; Submission 37; Submission 88.

1613 See: I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023; Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024; N Mitsopoulos, 'Marie-Anne always wanted to be Italian - and thanks to DNA testing, she found her Italian father', *ABC Radio Perth*, 15 September 2023, accessed 23 July 2024.

1614 Private individual 24, transcript of evidence; Submission 61; Submission 82; Submission 88. See also: Submission 72. See also: R McEnor, *Rebecca's Law: sojourn of a stolen father*, Fuzcapp Publishing, Gosford, NSW, 1999.

1615 Submission 88.

1616 Submission 48. See also: Submission 37.

1617 Submission 1; Submission 58; Submission 63; Submission 82; Submission 103; Submission 110; Submission 117; Submission 149; Private individual 22, transcript of evidence; Private individual 28, transcript of evidence.

9.130 Some contributors in evidence explained how their experiences left them too dysfunctional to parent their own children.[1618] Others who were able to described themselves as emotionally closed down.[1619]

> My children were subjected to my depression and inability to connect in a deep emotional way. Until recently, I have hidden my true feelings from them. I find this extremely distressing to speak about.[1620]

9.131 The daughter of a mother who lost a different child to forced adoption submitted:

> It's simple, APPARENTLY, one just starts at the beginning, but it really isn't that simple because EVERY DAY is yet another "Beginning" of a day spent without your PRECIOUS Child and Sibling.[1621]

9.132 The grandchild of an adopted person observed:

> What was clear and became more obvious as I grew from teenager into adulthood was that my grandmother had an emotional deficit; something she admitted to, and apologised for, when speaking with my mother in the later years of her life. My grandmother said she knew without doubt that this aspect of her interactions with us was a direct consequence of her experiences as an adopted person.[1622]

9.133 Some members of the next generation suffer from their adopted parent's estrangement from adoptive and/or original families.

> I love my children unconditionally and have tried to be the mother that I did not have. I feel sad and sorry for my children that they did not have the same celebrations with families that others have.[1623]

> The relationships of my kids to their grandparents changed once the Halls were advised that I had found my biological mother.[1624]

9.134 Just like their parents, the children of adopted people also experience not belonging. The daughter of an adopted person explained her experience of extended family growing up:

> something was in the way… something that separated us, it was us and then it was them.
>
> So as a kid, I was very baffled by this and tried going above and beyond to connect with them, doing everything I could too please them, but why did I have to fight for my approval whereas my cousins or other family members didn't? They naturally got it. What made me less? … We paid the price for my mums unhappiness and our isolation that we too suffer from mental health issues. My sister and I felt this at a very young age, mum had felt it her whole life. If family support had truly been there for us we wouldn't have suffered so much.[1625]

1618 Submission 119; Submission 149; Private individual 28, transcript of evidence.

1619 Submission 134.

1620 Submission 46.

1621 Submission 85.

1622 Submission 138.

1623 Submission 13.

1624 Submission 143.

1625 Submission 58.

9.135 So too are the children of adopted people affected by prejudice and the lack of information available to adopted people:

> My kids, as they've grown, are also confused and full of questions I can't even answer as I've not been told the full truth by my adopted side. And the confusion to them has painted me and others as liars as well since nothing is forthcoming and truly real after all these years of begging for clarity.[1626]

> My daughter was once told by her adult cousin that we aren't really related because we aren't blood. This reconfirms that society believes blood and identity is so important yet when adopted this is denied and supressed. My daughters are second generation and the rejection hurt isolation and disconnection still happens and they aren't the primary victims.[1627]

9.136 Subsequent generations also feel the flow on effects of inaccurate records on their own official documents, and incomplete or mistaken understandings of their genealogy and hereditity.

FINDING 52

Forced adoption policies and practices were damaging and have an ongoing negative impact on the mental health, health and life outcomes of those who experienced them and their families.

First Nations families

Forced adoption removed Aboriginal children from their culture

9.137 Yorgum Healing Services summarised the common impacts they encounter in clients seeking to reconnect with their families lost through forced adoption. These include:

- loss of language
- no sense of cultural identity
- disconnection to their culture
- no understanding of their biological and extended family structure
- lost opportunities to be exposed to and/or being unable to engage in law and significant cultural practices
- resultant feelings of not being able to contribute to their community in a meaningful way.[1628]

9.138 In addition to these severe social and cultural impacts, Yorgum added that the forced adoption of First Nations babies has serious health and wellbeing ramifications which extend across generations:

> the removal of children from their families and communities can lead to higher instances of ill health, incarceration, substance misuse, mental health issues, self-harm, suicide and mortality.[1629]

1626 Submission 103.

1627 Submission 58.

1628 C Augusston, Yorgum Link-Up Manager, Yorgum Healing Services, letter, 23 May 2024.

1629 Submission 139.

9.139 Of the Aboriginal people in evidence, some grew up knowing they were Aboriginal, and some not. Those not aware often grew up 'with a developing sense of difference or alienation'.[1630] Parts of their experiences are reproduced below.

Case study: discovering Aboriginality

"How could an aboriginal baby possibly flourish, or understand and learn about her culture? Whether this was due to lack of education or ignorance, or perhaps they just didn't [care]. I don't think I will ever know. …

In March 2020 … for the first time in my life, I am looking at a photo of my father.

I always knew somewhere, somehow, I was aboriginal. Some of my closest friends are aboriginal, and I always feel like I am home, when I am with them.

Finally, upon looking at my father's profile picture, I started making sense of my history, of myself, for the very first time. … My heart was beating out of my chest just looking at this man and stalking his profile. For the very first time I felt a sense of belonging, of family, of culture, my heart was full. …

Within a few short months, my father suffered a heart attack and passed away.

I did not get the opportunity to meet him. I did not get the opportunity to hold him. How can an already broken heart, break again and again?

How is this fair? I am completely devastated. How do I grieve for someone I've never met, but feel so connected to? …

we are not born blank slates. I don't fit in with my adoptive family, I am nothing like them.

We don't look the same, we don't think the same, we don't feel the same, we don't view the world the same, and we don't see others the same.

Do you have any idea how it feels to be brought up in a house, with a family to which you hold no connection, and feel completely out of place in every way possible?

Only 3 weeks ago, in June 2023, after a very heated discussion, did my adoptive mother, finally, admit to knowing that I was Aboriginal.

When my parents picked me up from Ngala, there I was, the only female baby, in a room full of baby boys, they told them that I had 'coloured blood'

I cannot believe that she did not tell me this earlier. For 49 years, I have been LOST."

[Source: Submission 119[1631]]

9.140 For one person, removed because she was fair-skinned and adopted by non-Aboriginal parents, by the time she was brought back together with her family she found that many members had no interest in her. She recounted the difficulty of trying to connect with the family that did not grow her up:

> I know it has been impossible to fit in with my aboriginal biological family … All the cousins, the bonds, the sibblings I didn't know. It was the hardest thing in life. … I was Johnny come lately so to speak. Even to this day I know only a tiny bit of my culture, I wasn't taught alot. Things sometimes are taught as children grow up. I was picked on and not thought of as family and I have been very distant. … my children have also suffered and my grandchildren have suffered because they

[1630] D Mellor and A Haebich (eds.), *Many Voices: Reflections on experiences of Indigenous child separation*, National Library of Australia, Canberra, ACT, 2002, p 64.

[1631] See also: Submission 93; Submission 148; Submission 148a.

> aren't thought of the same as my biological sisters or brother children because I wasn't there from the start. Everything was taken away. All my heritage, my culture, my family, my life was changed when I was forced adopted from my mother. I lost everything. And those years can never come back they can never be given back.[1632]

9.141 First Nations adopted people have specific support needs, and these are discussed in Chapter 11.

9.142 The Committee acknowledges the testimony of intercountry adoptees and those whose submissions advocated for them as fellow-victims of forced adoption. Their statements attest to comparable experiences of dislocation, cultural estrangement, language loss, racism, mental ill-health, human rights abuses and systemic failure.[1633]

[1632] Submission 93.

[1633] See: Submission 132.

CHAPTER 10
Overview of support services

10.1 The following chapters discuss the support available to people affected by past forced adoption practices, their experiences with accessing support and information, and what more is needed to adequately assist them.

10.2 Support most relevant to people impacted by forced adoption falls into the following categories:

- mental health
- search, contact and reunion
- genealogical assistance and research services
- records and official documents
- general support services.

10.3 Those with lived experience have differing levels of knowledge of existing support services. This is presented in the following chapters.

10.4 This chapter provides a brief overview of the available services across these areas. The system surrounding access to records and official documents is examined in Chapter 12. The adequacy of available services is evaluated in Chapter 14.

Current service providers

10.5 In addition to Post-Adoption Services run from within the Department of Communities, the inquiry heard from 4 not-for-profit organisations that provide a mixture of supports to clients affected by forced adoption:

- Adoption Research and Counselling Service (ARCS)
- Relationships Australia WA (RAWA), Forced Adoption Support Service (FASS)
- Tuart Place
- Yorgum Link-Up (Yorgum).

10.6 Between 1978 and the end of 2023, Adoption Jigsaw WA (Jigsaw) helped people in WA affected by adoption. In its last year of operation, the service was provided by one full-time administration and search officer and one longstanding part-time manager and counsellor, as well as volunteers. Jigsaw was largely a search and mediation service, but it also offered therapeutic counselling, ran peer-support groups, and was a source of information. It did not operate on a case-management model or refer clients to specialised services. It received most of its funding from the Department of Communities and charged fees for those in a position to pay for the services they needed. Jigsaw closed because of lessening demand for search services due to new technology, and with the hope that their funding would be redistributed and so help improve the services offered by other existing providers.[1634]

[1634] I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

Adoption Research and Counselling Service

10.7 ARCS began in 1983 at the University of Western Australia and grew out of the research of academics into the long-term impacts of forced adoption on mothers. The service is staffed by 3-4 counsellors (one of whom was also the manager) and 2 administrative staff. It is funded by the Department of Communities, charges fees to most clients, and receives a small amount of donations. ARCS provides therapeutic counselling to all people affected by adoption, as well as people considering having their child adopted, or considering adopting. They also provide services in adoption records, searching for family, outreach mediation and post-reunion support, as well as other parenting services. The service operates out of an old house in Maylands in the Perth metropolitan area.

10.8 ARCS was unable to apply for funding under the federal Forced Adoption Support Service (FASS) scheme that grew out of the Senate inquiry. Despite having provided specialised counselling around adoption for 40 years at the time, the criteria required the provider to already be running a programme receiving federal funding.[1635] At that time, Relationships Australia WA was appointed the FASS provider for the state.

10.9 The next box examines funding to ARCS to provide free forced adoption counselling.

Forced Adoption Support Service

10.10 After the Senate inquiry into forced adoption in 2012, the Australian Government began funding the Forced Adoption Support Service (FASS). In Western Australia, the service has been operated by Relationships Australia WA (RAWA) since 2015.

10.11 FASS funding to the individual states and territories is based on total population. RAWA's FASS funding allows it to provide the equivalent of one full-time staff member; this is made up of a manager, a counsellor/case-manager, a genealogist for family research and assistance with accessing records, and a customer service officer. In practice, RAWA FASS offers information, inquiry and referral services in business hours, one day of client-facing counselling and support sessions per week, and one day of client-facing records research per week. In addition to case-management, counselling and genealogy support, the service hosts peer-support groups, workshops and events, and offers small grants annually for projects related to forced adoption. RAWA FASS does not charge fees.

10.12 RAWA also runs other specialist support services funded by the Australian Government Department of Social Services, such as Find and Connect for Forgotten Australians and Former Child Migrants and Redress Support Services to support people applying to the National Redress Scheme. Staff work across the different funded services, and they all operate out of the same old house in Bemont, near to Perth.

10.13 RAWA told the Committee that it is overservicing forced adoption clients because the demand for support exceeds its funding allocation for FASS. Although FASS is conceived as a statewide service, the funding does not extend to outreach services and merely means they will take phone inquiries and assist forced adoption clients over the phone if asked. FASS employs a case management model, so although select clients may receive some therapeutic counselling, they are unable to provide it to most clients as a standard service. RAWA staff explained that they have the discretion and training to give therapeutic counselling, but not the funding capacity. However, in other Australian jurisdictions FASS providers are able to offer this kind of support routinely, because their populations mean they receive greater federal funding.[1636]

[1635] Submission 113.

[1636] Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

ARCS funding to provide free counselling for survivors of forced adoption

Prior to Jigsaw closing, ARCS had a normal wait-time of 3 months for an initial appointment, apart from urgent cases. They expected increased demand for their services as a result of Jigsaw closing, with the potential for 150 clients needing to find a new provider, and staff told the Committee ARCS was short of resources.

On 21 March 2024, the WA Government announced that ARCS would be funded for 2 years to provide free therapeutic counselling to forced adoption clients, including the siblings, partners and children of survivors, and telehealth appointments for regional residents.

The announcement surprised clients and staff at other service providers. Relationships Australia wrote to the Committee:

> It is unfortunate that there was not an open, transparent community consultation and/or tendering process. Many of our members have expressed frustration and disappointment that this was a surprise decision. Many have expressed disappointment that the government did not wait until the outcome of this committee's inquiry and then allocate resources according to considered findings.

In April 2024 the Committee asked ARCS for information about their funding and capacity to provide the announced services; however, to date ARCS has not been able to provide a response due to the death of a longstanding staff member, who acted as both manager and counsellor. Around this period the ARCS website warned that there were longer than usual wait times for appointments.

The Department of Communities advised the Committee that the additional funding to ARCS for free counselling to forced adoption clients was $217,256 for the period 1 January 2024 to 31 December 2025.

When asked, the Department of Communities explained that the funding decision was made without consultation to provide ongoing service provision following the closure of Jigsaw. It was informed by parliamentary inquiries in other jurisdictions and the Department's analysis of public submissions to this inquiry.

The 2-year funding was intended to allow for assessment and service redesign if necessary. The Department stated:

Communities is committed to a full consultation process on the future design of funded adoption services, following the recommendations of the Inquiry. The free counselling services delivered by ARCS, will ensure survivors continue to have access to appropriate support and counselling in the interim.

Similar to Jigsaw, the operation of ARCS appears to have depended heavily on the expertise and experience of a single staff member. The Committee has concerns about the present capacity of ARCS to meet the needs of forced adoption clients wanting to take up the opportunity for free counselling, considering it was already struggling to meet demand prior to the funding announcement and loss of its long-serving counsellor and manager.

[Sources: Hon S Winton, Minister for Community Services, *Free counselling service for survivors of forced adoption*, media statement, WA Government, 21 March 2024; Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024; Department of Communities, email, 7 June 2024; Department of Communities, email, 12 June 2024]

Tuart Place

10.14 Tuart Place grew out of a drop-in support centre for people who had been in institutional or out-of-home care as children. Since 2012, Tuart Place has been a one-stop, wrap-around support service for care leavers, run out of a historic building in Fremantle. The definition of care leaver includes anyone who spent time 'in any kind of state-governed or religious care', including foster care, before the age of 18.[1637] Care leavers co-designed Tuart Place, sit on the board and manage the social connection aspects of the service.

10.15 Tuart Place is not a specific adoption or forced adoption service; however, its services extend to people affected by forced adoption if they are also care leavers. For example, Tuart Place would provide support to:

- an adopted person who spent time in a state or private institution or in foster care after birth
- a mother who spent time in state or institutional care as a child, before pregnancy, while pregnant or after birth if under the age of 18 at the time.

10.16 The director of Tuart Place explained that, due to the cycle of trauma, many of Tuart Place's female care leaver clients also had their babies taken from them through forced adoption or later practices.

10.17 It seems that mothers who were in institutions before or after their birth but were older than 18 are the time are not able to use Tuart Place, even if they were under the age of majority at the time (21 prior to 1972).

10.18 It is unclear if adopted people who spent extended time within the health system as infants are included as care leavers. Further, although the government played a role in making infants available for adoption and making people adoptive parents, adoptive families are not considered out-of-home care. The director stated:

> Adoptees are not considered to be care leavers and are not eligible per se, but it is just because there is such a big overlap between the two groups that we do work with that group as well.[1638]

10.19 Contributors to the inquiry did not seem aware that they may be eligible to access services through Tuart Place and it is likely because they are not automatically so under the above definitions.

10.20 Similar to FASS, Tuart Place provides counselling, help with accessing records and family tracing, social support groups, events and general life skills. It also assists with applications to the National Redress Scheme. It has 12 staff that make up the equivalent of 7 full-time positions, including social workers, counsellors and an aged-care navigator. Funding for most of these positions comes through annual service agreements with the Department of Communities. Tuart Place does not charge fees.

10.21 Tuart Place said there are significant similarities between the needs of people affected by forced adoption in general and care leavers in general:

> Survivors of forced adoption often suffer similar impacts to care leavers, including problems with identity and attachment, anxiety, depression, complex PTSD, difficulty building and maintaining healthy relationships, shame and low self-esteem, distrust/fear of authorities, and resistance to engaging with bureaucracies. Services accessed by the two client groups are the same … The Tuart Place model

[1637] Dr P White, Director, Tuart Place, transcript of evidence, Legislative Council, 12 June 2024.

[1638] Dr P White, Director, Tuart Place, transcript of evidence.

> of support is based on providing a non-bureaucratic, drop-in space where survivors can build trust and establish a sense of safety. Tuart Place operates as a 'no wrong door' one-stop-shop, where clients can access clinical and professional services at their own pace, and 'dip in and dip out' of counselling and psychological support. This trauma-informed model of support is well suited to survivors of forced adoption.[1639]

Yorgum Link-Up

10.22 The organisation now named Yorgum Healing Services was begun by a group of Aboriginal women in 1991. It is an Aboriginal Community Controlled Organisation and runs out of a head office in East Perth, with family support services in Albany and Kalgoorlie.

10.23 The Yorgum Link-Up service has offices in Perth, Kalgoorlie, and South Hedland, from which it services most WA. It is for First Nations people separated from their families due to the removal policies and practices of past governments, including those put into institutions and those adopted or fostered.[1640] The service provides counselling, support, support groups, advocacy and family research. It also organises reunions and runs healing events. Yorgum Link-Up staff includes researchers, counsellors, case workers, and team leaders.

10.24 Family reunifications facilitated by Yorgum are federally funded through the National Indigenous Australians Agency. Of this funding, the service commented:

> Attempting to measure the healing journey of an Aboriginal client who was forcibly removed is difficult as each case is unique. Funding from NIAA for reunions is limited, allowing five days for this process to occur. As an organisation, we are aware this is insufficient, as a healing journey may take many years.[1641]

10.25 Yorgum noted that the Kimberley Stolen Generations Aboriginal Corporation (KSGAC) runs a similar service for First Nations clients in the top-end.

Post-Adoption Services, Department of Communities

10.26 At present, the Post-Adoption Services team within the Department of Communities supports people affected by forced adoption. Based in Fremantle, the 12.5 FTE team services clients affected by historic and more recent adoptions, and sits within the broader Adoption Services team. It consists of:

- Team Leader (1 FTE)
- Senior Child Protection Worker (1 FTE)
- Child Protection Worker (4.5 FTE)
- Senior Information & Research Officer (2 FTE)
- Information & Research Officer (3 FTE)
- Information Officer (1 FTE)

10.27 Child Protection Workers hold degrees in social work, psychology or their equivalent and their training and practices are trauma sensitive, trauma informed, and include components specific to forced adoption.[1642]

1639 Dr P White, Director, Tuart Place, letter, 1 May 2024.

1640 Yorgum Healing Services, Our Services, yorgum.org.au, 2024, accessed 25 June 2024.

1641 C Augusston, Yorgum Link-Up Manager, Yorgum Healing Services, letter, 23 May 2024.

1642 Department of Communities, email, 7 June 2024; Department of Communities, email, 12 June 2024.

10.28 Support provided through Post-Adoption Services includes:

- 'supporting access to adoption-related information and providing information
- connecting people (outreach)
- notifying parties to an adoption of a death
- making referrals for support and/or counselling
- receiving notification of a discharge of an adoption'.[1643]

10.29 In the past, the Department provided counselling relating to adoption information and contact in some circumstances.[1644] Its staff are able to support people receiving their records.

[1643] Department of Communities, email, 7 June 2024.

[1644] Department for Community Development, *Information about Adoption: Obtaining adoption information*, 2006; Department for Community Development, *Information about Adoption: Past adoption register and outreach service*, 2006, provided by Private individual 13, answers to questions on notice.

CHAPTER 11
Mental health

11.1 Chapter 9 laid out the ongoing negative impacts of separation on adopted people, mothers, fathers, wider family and later generations. The following chapters explore the difficulty of accessing and receiving records as well as searching and reunion.

11.2 Chapter 15 considers the need for public acknowledgement of the harm caused by forced adoption, and the need for greater awareness of this aspect of WA history generally. Actions towards these will be psychologically beneficial for those adversely affected by forced adoption.

11.3 This chapter discusses the emotional and psychological support that has been and is currently available, and the unmet needs of those affected that must be addressed.

Accessing mental health support

Who needs support?

11.4 People in evidence spoke about struggling, and not necessarily realising that their struggles were related to forced adoption until a later point. As discussed in Chapter 1 and Chapter 9, some came to this understanding quite recently, and others do not currently attribute their pain to forced adoption. This means that some people may need support but not know it, or that they may be prevented from seeking it because of their difficult experiences. The following exchange from a private hearing with an adopted person illustrates this:

> Hon SHELLEY PAYNE: Have you ever looked at accessing any kind of specific forced adoption support and counselling services? Did you become aware of them?
>
> [WITNESS]: No. I did not know anything about that. I know Jigsaw exists—well, it is closing down now, but that was the only place I ever knew about. But you know, the thing about that is because I had so much denial and shame, I would not have done that. Not me—I am fine. But I think that times have changed a little bit now, I hope.[1645]

11.5 The following categories of people affected by past forced adoption may benefit from therapeutic approaches:

- adopted people
- mothers
- fathers
- the children of mothers and fathers (siblings of adopted people)
- the partners and children of adopted people
- adoptive parents

11.6 These cohorts and some groups within them have specific needs, as follows.

[1645] Private individual 18, transcript of evidence.

Adopted people

11.7 ARCS submitted that adopted people continue to be affected by traumatic separation from their mothers and families as infants, and to feel flawed and different, but that it can be hard for them to express negative feelings about their adopted status out of loyalty to adoptive parents. They commonly present with 'identity issues, fear of rejection, abandonment, trust in relationship and depression and anxiety'.

11.8 Female adopted people said adopted men deal with being adopted differently to them, and face hurdles because of their gender when it comes to seeking and taking up support. They stated that research supports the need for specific strategies and spaces for men.[1646]

11.9 Those that discover their adoption later in life also have unique needs, including expedited access to information, records, support and counselling.[1647]

Mothers

11.10 According to ARCS, mothers suffer ongoing trauma from having their babies removed and the aftermath, as well as experiencing shame, guilt, and unworthiness at being considered unfit to raise their child. Their emotions create conflict because of the brainwashing they were subjected to that they were giving up their children out of love.

Fathers

11.11 ARCS views fathers who went through forced adoption as often forgotten in conversations around necessary support.[1648] RAWA FASS explained that the feelings raised by experiences specific to fathers require specialised supports at the client's pace:

> Some fathers have expressed difficulties coming forward as they do not see the activities offered as being for them. Some fathers remained with the mother, spending many years together often raising more children together. Many fathers are unaware of being a "father of an adopted child". Often fathers have not been named on birth certificates. Many fathers have found out later in life when an adopted child has approached them, increasingly through recreational DNA tests.[1649]

11.12 Fathers too can be impacted by debilitating shame. The manager of RAWA's FASS said that, for some fathers that were left out at the time of their children's births, there are no services designed to support them directly and this maintains the injury.[1650]

Following generations

11.13 An ARCS counsellor testified about the flow-on effects of forced adoption on those not present at the time:

> we see people that are impacted by forced adoptive practices that you might not think of initially. … the effects of these practices were wide reaching and intergenerational. Now, we have got adopted people having children and it is impacting their parenting, or parents having subsequent children. … it ripples throughout the community. Whilst everyone's journey is very individual to their experience, the effects of the grief, the loss and the trauma are somewhat

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1646 For example: Private individual 1, transcript of evidence; Private individual 18, transcript of evidence.

1647 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1648 J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

1649 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1650 Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

> consistent, and the shame and guilt that goes with a lot of these experiences are very pervasive and continue intergenerationally as well.[1651]

11.14 The Australian Psychological Society submitted:

> Support and intervention will also need to be made available to subsequent generations who experience the intergenerational impacts and trauma associated with forced adoption policies and practices.[1652]

State wards and child migrants

11.15 As the director of Tuart Place made clear, there is a notable overlap between care-leavers and people affected by forced adoption. RAWA FASS said, 'This is a population with varied needs; individual therapeutic support, reunion support, record assistance, political advocacy and public psychoeducation all need to be considered for a holistic approach.'[1653]

Aboriginal people

11.16 The specific experiences of Aboriginal people in WA, and the cross-over between forced adoption and stolen generation practices, were discussed in Chapter 2. Chapter 9 discussed the ongoing impacts of separation through forced adoption on First Nations people. RAWA FASS reported that Aboriginal people make up 9% of all FASS clients; a figure significantly higher than the population. The service manager said:

> our observations and understanding from listening over many years, is that a service needs to understand the importance and impact of culture on identity and that removal through forced adoption is a significant trauma.[1654]

Adoptive parents

11.17 Mothers expressed concern and anger that funding allocated to services for those affected by forced adoption includes adopters, because they perceive them as having benefited from their own and their children's trauma. Adopters experiences differ again from those of parents and adopted people. RAWA FASS advised that they have very few inquiries from adoptive parents and have only provided brief support in the past. Its regular practice is that no clients attend the same appointment times or share waiting areas.[1655] When the Committee asked, the director of Tuart Place said the inclusion of adoptive parents may have potential for restorative justice approaches.[1656]

When do people seek mental health support?

11.18 People affected by forced adoption have ongoing mental health needs and explained that impacts can worsen over time. The manager of ARCS highlighted the episodic nature of interventions:

> We are a therapeutic service, so we are therapeutic counselling right across the life span of people. If you imagine people's life span and different things happen, that is when they might come to us at critical times. We also see people when they are

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1651 K de Cinque, Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023. See also Private individual 22, transcript of evidence.

1652 Submission 91.

1653 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1654 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1655 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1656 Dr P White, Director, Tuart Place, transcript of evidence, Legislative Council, 12 June 2024. See also: J Aroche, CEO, NSW Service for Treatment and Rehabilitation of Torture and Trauma Survivors, letter, 15 May 2024.

> thinking of searching for their family. More commonly, we will see people after they have either been able to find their family, not been able to find their family or have had an unsuccessful reunion. That is when they would seek counselling. … There are times when maybe their adopted parents have died or their parents are sick or they have died as well. They might be having their own children. All those significant life events are when people come to us because it is about family and the connection. [1657]

11.19 Contributors commonly mentioned that their or their child's birthday as a particularly difficult time. Both mothers and adopted people also related that, because of the severe impacts of forced adoption, reunion meant that they sometimes found themselves faced with a key family member they did not know but who was in a state of psychological crisis.[1658]

How do people find mental health support?

11.20 Contributors described finding support services in various ways, including:

- independently
- through a government agency
- GP referral
- with the support of concerned family or friends.

11.21 An adopted person explained that they were required to undergo counselling by their workplace:

> I never thought I needed therapy. I thought I was fine. Then something happened. I wanted to do a particular role in an organisation and they said "It is mandatory that you do therapy". I was like "Oh, all right", tick the box and off I go. That began the unpacking. That was when I took off the rose-coloured glasses.[1659]

11.22 In the past and more recently, the Department has given people a list of support and counselling services that included providers such as Jigsaw, ARCS, RAWA FASS and peer-support group Association Representing Mothers Separated by adoption (ARMS).[1660]

11.23 The ARCS manager said they do not generally get referrals from Post-Adoption Services within the Department, even though they receive them from other areas of the Department and other sources.

> With the Department of Communities—remember we are dependent on them for our funding, and we are grateful for their funding. … They do not refer hardly anyone to us. … perhaps they can believe they can do everything. We would only get a handful of referrals a year … it would be really good if they could think of how they could refer people in a way that is helpful for the person. They do give them a piece of paper with our name and Jigsaw's on, but we know, as clinicians ourselves, you have to work with the person to refer them and they have got trust

[1657] J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

[1658] For example: Submission 112.

[1659] Private individual 18, transcript of evidence.

[1660] For example: Submission 109; Private individual 13, answers to questions on notice.

> in who they are referring to, what is going to happen, and that just does not happen. [1661]

11.24 The Committee is concerned about the many people affected by forced adoption who have interacted with the Department. They appear unaware of services that are available to them and how to engage those services. Some contributors were surprised that there was little follow up.[1662] One witness said:

> when they sent my pack out, they just said services are available, but that is it. There is no follow-up, I guess. … I had not heard of adoption counselling services. I had not heard of that before. … Obviously, they are there; it is just whether people recognise they are there or what the steps are to reach out to be able to obtain those services. … There was no road map. There was a paragraph to say that services are available, but that is where it was left. If it was more of a step by step, or a road map, I probably would engage those services.[1663]

FINDING 53

The Department of Communities does not adequately engage with people affected by forced adoption or facilitate their access to external support services.

RECOMMENDATION 4

The WA Government consult with support service providers and people affected by forced adoption to:

- improve the quality and dissemination of information on available mental health supports
- devise better internal procedures for interacting with forced adoption clients, and for connecting people to relevant supports and following-up
- increase referrals to external support services.

Types of support

11.25 In addition to the organisations discussed in the previous chapter, people affected by forced adoption seek out psychologists, psychiatrists, counsellors and other therapists in private practice. A number of therapeutic modalities were said to be helpful, from traditional psychological approaches to family, somatic, creative and novel therapies.

11.26 Researcher Dr Christine Cole submitted that standard 'talking' therapies can pose risks of re-traumatisation for forced adoption clients, and non-verbal treatments can be beneficial in the earlier stages. She said therapy 'needs to help people feel a greater sense of calm and control and rather than trying to understand the traumatic narrative'.[1664]

11.27 An adopted person echoed this, saying:

> I have literally spent thousands of dollars on every conceivable form of therapy available from CBT, EMDR, SE (Somatic Experiencing) psychotherapy, psychodrama, hypnosis, neurofeedback. Some of these therapies, namely CBT and SE have been helpful in grounding me, providing a framework for learning more

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1661 J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

1662 For example: Private individual 30, transcript of evidence.

1663 Private individual 8, transcript of evidence.

1664 Submission 72.

> functional behavioural skills. I have yet to find a therapy that can really deal with preverbal trauma.[1665]

11.28 The next section identifies what kind of mental health support people affected by forced adoption need, based on their experiences of engaging with mental health services or otherwise.

Experiences and needs

Some people have never accessed mental health support

11.29 Some people who had endured very difficult experiences around forced adoption had never accessed any therapy to support their mental and emotional health.[1666] They gave the following reasons:

- they were not aware of existing supports
- counselling to deal with the trauma was never offered
- the expectation to get on with life
- stigma around mental health issues and lack of opportunities for support in the past
- trust issues following forced adoption experiences with counselling and social workers[1667]
- belief that it is too late
- feeling insulted at being offered it after so long
- having learnt their own ways to cope with ongoing trauma and grief
- being disassociated from the trauma
- being effectively silenced by their experiences and the secrecy surrounding adoption
- being medicated.

11.30 RAWA FASS explained that trust issues with 'helping' professionals plague both parents and adopted people, and must be approached transparently and through offering choice and options:

> Social workers were often involved in the initial adoption process and many people understandably, may not trust working with them. We also have supported people who are extremely anxious, stressed, and concerned with some interactions with Hospitals, Nurses, Doctors, Dentists, Nursing Homes, and religious or faith-based operated services. There can be a need for specialised specific support for individuals with a trauma background in situations where there is an imbalance in power or authority, which may cause distress or initiate a trauma response. Significant numbers of people equally express concern in dealing with mental health staff, nurses, psychologists, psychiatrists, and counsellors, due to their distressing experiences and treatments during and after their forced adoption experience.[1668]

1665 Submission 71.

1666 For example: Private individual 5, transcript of evidence; Private individual 13, transcript of evidence; Private individual 21, transcript of evidence.

1667 See: Submission 81; Private individual , transcript of evidence; Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024, p 1; Dr P White, Director, Tuart Place, transcript of evidence, Legislative Council, 12 June 2024.

1668 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

11.31 The Committee asked one adopted person what services could be organised to help her mother. She suggested that some affected are beyond reach:

> I do not know that you can, if I am her daughter and I cannot speak to her. She has been told to bury it for the last 57 years … She walked out of there feeling all the guilt and shame of being an unmarried mother, or whatever, and told to forget it. She does not want to know. … I would suggest that there is a lot like that.[1669]

Others reported a mix of experiences

11.32 Amongst those that did access mental health services there was a variety of experiences. Some:

- did not go until multiple decades had passed
- made it to counselling but it was not helpful, so they never went back
- persevered but ultimately gave up when their symptoms never abated
- stopped attending because it was too distressing
- saw a string of different practitioners
- stayed with the same therapist for a very long time
- could not afford to continue treatment
- reported mixed results, from excellent to extremely dangerous.

11.33 Contributors reported positive and negative experiences when accessing Jigsaw, ARCS, and RAWA FASS services.

The cost of therapy is a significant barrier

11.34 Inquiry contributors explained that the cost of mental health care was a huge burden.[1670] For many it is a case of being damned either way, because paying for therapy is financially unsustainable but not getting it can mean they cannot work, function or stay alive. Some people have been so debilitated by their poor mental health they are financially disadvantaged.

> The care that I have sought out has been through my own sourcing of private psychology sessions at my own expense, which is not covered by Medicare and is not often covered by private health cover unless you have got a doctor's care plan.[1671]

> I've gone broke on paying for psychology and trying to go back to work … I can't afford the therapy I need and sometimes can't afford the medications I require[1672]

> I am 54 years old, only now getting the help I have needed to live within myself. The cost financially is substantial for me, I attend twice a week and spend half of my wage on therapy. Therapy is not optional, given how I feel.[1673]

[1669] Private individual 4, transcript of evidence.

[1670] Submission 123.

[1671] Private individual 1, transcript of evidence.

[1672] Submission 17.

[1673] Submission 39.

11.35 The husband of a person adopted in 1965 submitted that they were fortunate he was healthy and able to maintain a business and so able to fund the expensive process of addressing his wife's trauma.[1674]

11.36 The inquiry was given a large amount of evidence itemising the expenses people incurred when trying to deal with their forced adoption experience. Expenses included:

- GP fees for obtaining referrals
- private therapist fees (requiring full or gap payment)
- medication for depression and anxiety
- fuel costs for accessing mental health care from the regions
- loss of income when attending appointments
- loss of income for family driving the person to attend appointments
- fees for necessary information, including official records, DNA testing, online genealogical database subscription

11.37 For therapy alone, costs to date in excess of $10,000 were not uncommon.

Counselling that is affordable, reliable and enduring is required.

- Name withheld, submission 98

11.38 Submitters also explained that some of the therapy they find most beneficial does not attract a Medicare or private health insurance rebate, but they have continued to access it out of necessity.

11.39 One adopted person explained he quit a well-paid career role to pursue healing, which came at a high cost. He said:

> in the four financial years since then, my total combined income is still $15 000 short of my 2018–19 taxable income of $130 000. I may have healed, but I have also been humbled and I still only have a part-time job.[1675]

11.40 Contributors described how getting older creates a further strain on receiving necessary mental health care:

> As Being ill and unable to work I had to sell property to financially survive. Many women find as they age their psychological and physical problems put them in dire financial straits.[1676]

> I cannot imagine not needing psychological support for the rest of my life, but I am still working now, as a 67-year-old, and I have a contract until I am 70. It is expensive to see my psych; it is $245 and the government pays $80 of that, I think. When I am on a pension, how am I going to afford that? … I need that support and I am not going to be able to afford it. I found it difficult over the last year and a half to afford it—I have had to put off appointments and waited until I could do it.[1677]

[1674] Submission 92.

[1675] Private individual 17, transcript of evidence.

[1676] Submission 72.

[1677] Private individual 27, transcript of evidence.

The need for forced adoption-related mental health care is ongoing

11.41 Many affected people stated that although the costs are not sustainable for them, their need for mental health care has no defined limit. For example, a mother said:

> I have spent thousands over the years I have had counselling. This is lifelong. Does not have an end date. Different stages of life bring up issues and emotions.[1678]

11.42 Adopted people testified to their mental health needs increasing as time passes:

> As I have got older, I have probably seen the need for more counselling services. I do not know whether that is just a change in life or just age or it gets to a point where, you know, an accumulative effect of things is that I need to speak to somebody. Every time that I have sought counselling services, it usually always reverts back to adoption and thereafter. If services were readily available, then I would take them up. But, yes, cost is always a factor and also these days actually finding somebody.[1679]

> [Services] probably need to expand right over the lifetime of the individual, because anecdotally we are finding people are becoming more and more unwell psychologically as they get older, and I am not sure why that is, whether we are just in that space of you have got on empty nest, now you have got time to think about and process your experience, or just because there is just been such a lack of support over our entire lifetimes that we are just floundering constantly because our needs have not been met, ever.[1680]

> I have suffered extreme mental health issues my whole life. I'm now 56 years old.[1681]

> My adoption has taken a huge toll on me, and will no doubt continue to do so for the rest of my life. I always feel like I am 100 steps behind the starting line of life and will always be trying to catch up.[1682]

11.43 Jigsaw identified:

> One of the rock beds of understanding adoption, is understanding that adoption is not an isolated event, but rather one that has lifelong consequences for all the parties involved.[1683]

11.44 The need for continued support was evidenced by the Australian Psychological Society, who submitted:

> Given the prevalence of complex trauma associated with forced adoption, the need for psychosocial and psychological support and intervention for those impacted is likely to be ongoing and across their lifespan.[1684]

1678 Submission 70.

1679 Private individual 8, transcript of evidence.

1680 Private individual 1, transcript of evidence.

1681 Submission 14.

1682 Submission 119.

1683 Submission 84 from Adoption Jigsaw, 16 June 2023, p 4. See also: Private individual 6, transcript of evidence.

1684 Submission 91.

11.45 Mothers, fathers and adopted people want and need accessible and funded therapeutic mental health services on an ongoing basis.[1685] They told the Committee:

> we deserve to have free mental health services. We did not ask for this to happen to us so the responsibility falls on the government now to take care of us.[1686]

> The Department of Communities should have organised ongoing counselling for me and any other members of my family that wanted it.[1687]

11.46 ARCS submitted that the need for free and accessible specialist counselling was demonstrated in all the previous parliamentary inquiries in other jurisdictions and recommended in the Senate report in 2012. That recommendation read:

> that the Commonwealth, states, and territories urgently determine a process to establish affordable and regionally available specialised professional support and counselling services to address the specific needs of those affected by former forced adoption policies and practices.[1688]

FINDING 54

People affected by past forced adoption need financially accessible, securely funded mental health services to address and ameliorate the impacts of forced adoption.

Mental health services must be independent of adoption services

11.47 Some contributors in evidence want to see a central place for accessing both records and counselling, or for medical, mental health, genealogy and family support.[1689] However, Anne Cunningham, in a 1996 report to the Tasmanian government on forced adoption advised:

> There are many mothers who because of their past associations with the government adoption service chose not to access their counselling facility. They contend that any counselling offered must be independent and not associated with the adoption agency … with recent recognition that many of these mothers may be suffering from post traumatic stress disorders, trauma counselling should be offered … It is acknowledged that the symptoms of PTSD can be intensified when the person is exposed to a similar situation resembling the original trauma … It would appear that one of the key symptoms of PTSD is the avoidance of any reminders of the trauma.[1690]

11.48 Paragraph 11.30 described how some people who encountered counselling, social workers and public health professionals in the context of forced adoption can feel unsafe with similar interactions today, and avoid them. It is reasonable to assume that this would also apply to the bureaucracy surrounding adoption.

11.49 Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS) suggested that, for people impacted by forced adoption, it was important that support

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1685 Submission 58a; Submission 59; Submission 68; Submission 88; Submission 92; Submission 94; Submission 105; Submission 112; Private individual 15, transcript of evidence; Private individual 24, transcript of evidence.

1686 Private individual 1, transcript of evidence.

1687 Submission 46.

1688 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, accessed 18 April 2024, p 233.

1689 For example: Submission 20; Submission 58.

1690 A Cunningham, *Background paper for the Minister for Community and Health Services on issues relating to historical adoption practices in Tasmania,* Department of Community and Health Services, Tasmanian Government, 1996, pp 72 and 74, cited in Submission 72.

interactions were structurally separate from the agencies involved in them. The CEO of STARTTS stated:

> attention would need to be given to ensure that any services provided to survivors of forced adoption are provided in a setting and in a way that differs as much as possible from the original setting where trauma took place, even if still provided by social workers.[1691]

11.50 Currently, the Department of Communities holds most adoption records. The independence of records services is discussed in Chapter 12.

11.51 As detailed in the previous chapter, in the past, the Department provided a service it termed 'counselling' around search, contact and reunion in some circumstances. Whereas now the Department states that Post-Adoption Services refers forced adoption clients for support and counselling, they currently provide support for release of records. This and other interactions take place with staff that do not necessarily hold qualifications in counselling, including social workers, in roles including Child Protection Workers. Post-Adoption Services sits within the larger Adoption Services in the Department, and Child Protection Workers work across both areas.

11.52 The Committee is of the view that there needs to be a clear line between the provision of information and practical advice and other forms of support when it comes to interactions between people affected by forced adoption and the WA government department historically involved in forced adoption. The Committee also questions whether it is sufficiently sensitive to have Child Protection Workers dealing with forced adoption clients.

11.53 Submitters pointed out that 'some of the service providers are actively involved in arranging overseas adoptions – an obvious conflict of interest'[1692], and that RAWA grew out of the *Australian National Marriage Guidance Council* – a history some mothers whose babies were taken because they were unmarried may find confronting.[1693] These situations may constitute further barriers to those seeking the help they need.

11.54 Those who were in institutions as part of forced adoption, whether religious or otherwise, may be further harmed if required to interact with such places. An adopted person testified:

> if you have been in a traumatic situation in an institution where you do not trust what people say and do; how do you get them the help that they need if it is another person from another institution? [1694]

FINDING 55

Mental health services for people affected by past forced adoption must be independent of the WA government department historically involved (currently the Department of Communities) and non-government institutions that played a role in forced adoption in WA.

[1691] J Aroche, CEO, NSW Service for Treatment and Rehabilitation of Torture and Trauma Survivors, letter, 15 May 2024.

[1692] Submission 50.

[1693] Submission 133.

[1694] Private individual 4, transcript of evidence.

Some accessed services have been unhelpful or harmful

11.55 Contributors described a range of negative experiences relating to mental health services they accessed in the past. Accounts included that sessions were unhelpful, ineffective, pro-adoption, and triggering.[1695]

11.56 Accessing mental health care is difficult for some contributors. GPs rarely know what to do with the information their patient provides about adoption. For example:

> When answering a practitioner that I had no idea of my family medical history as I was an adopted person, it was always evident that there was no understanding by the practitioner on how to approach such an answer, what advice to give someone in this situation or where and who to turn to, in order to obtain such information.[1696]

11.57 Many of those who saw psychologists had bad encounters. One mother was told that her reaction to her child's removal for adoption was psychologically abnormal; this contrasts with the positive experience of another mother who felt understood for the first time when told her responses were normal.[1697] Another found counselling revisited her trauma but did not address it:

> With adoption, there is a whole lot of 'stuff' to make peace with, much will forever be out of control and there is no way to reconcile and bring closure. Having someone guide healing without a complete comprehension and delving into that 'stuff' will be detrimental. It is given a little air but continues to rot and fester. This is what happened to me, the stuff had been stirred up and put back down without resolution. … [I] would not risk my mental wellbeing with any counsellor unless they could prove a deep insight and a rock solid guarantee of a vast improvement to my function with absolute zero chance of retraumatisation.[1698]

11.58 Others said that while they received help for general dysfunction, services did not go far enough:

> Of the many psychologists I have seen for some 30 years, many have not understood the impact of the early and ongoing stress adoption has had on me, focusing primarily on the dysfunction of my adoptive family, which of course played a major role in my distress, however the first separation from my birthmother and the subsequent lack of information, has caused a deep neurobiological vulnerability which I have taken into adulthood and have been trying to heal ever since. Adoption for me has meant psychological torment, and *there by the grace of God go I* that I have survived to write this document today. We cannot expect babies that have been separated from their mothers under these conditions to be wired like other people. It is highly traumatizing for any baby, and is counter to any biological process seen in the natural world.[1699]

11.59 Many affected have never found a practitioner with the right approach:

> I needed to invest in more targeted therapy. Unfortunate I have yet to find a suitable therapist truly able to address the impact my adoption has had on my life.

1695 For example: Submission 67; Submission 87; Private individual 1, transcript of evidence.

1696 Submission 48. For the opposite response, see Submission 70.

1697 Submission 6; Submission 70.

1698 Submission 98.

1699 Submission 71 (emphasis in original). See also: Submission 52.

> Living in a regional area has also added to the difficulty and expense of accessing appropriate professional support.[1700]

11.60 Somewhat ironically for a dedicated service, RAWA FASS told visiting Members that, whereas their funding mostly limits their service to a case-work approach, forced adoption clients want to access a traditional therapeutic model.[1701]

Specialised support is needed

11.61 Evidence consistently shows that general counselling is not addressing the needs of people affected by forced adoption. It appears that many practitioners do not understand the trauma inherent in forced adoption experiences. Some contributors said they had to educate the counsellor, which was itself re-traumatising.[1702]

11.62 For example, 2 mothers testified:

> Unfortunately, the counsellors do not know anything about adoption, and when they go to them and say, "I've got these problems", they will say to them, "Oh, it's got nothing to do with adoption." Well, we know damn well it has got everything to do with adoption. I do not know how you are going to fix that because the counsellors need to be educated in trauma—I do not know—because it is all trauma that they all go through.[1703]

> I went to counsellors in the past and it was all like, you know, "You have just got to change your thoughts and think positively", and all this, and it was like they did not get it, so it was not successful at that time. I think in helping myself and others is having specific counsellors trained that can help get this out and have more of an understanding. … If anything can be achieved, it is to get counselling for that specifically, for this trauma.[1704]

11.63 Adopted people similarly stated:

> I have attended many counselling sessions over the years, none have ever considered how my adoption could have affected me. I have not been able to source an adoption competent counsellor. No body really gets it, they all think I should be grateful or just get over it.[1705]

> Despite my repeated efforts to seek and receive the assistance I desperately need to process my adoption, I have made little progress, which is incredibly frustrating as I have tried so hard, only to be let down repeatedly. It is exceptionally challenging for me to ask for help, and though I have tried to find services that will provide assistance, I have left feeling misunderstood, minimised and re-traumatised. I feel like the government has made promises to ensure access to help, however, have not delivered services that are truly knowledgeable within this field.[1706]

1700 Submission 79.

1701 Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

1702 For example: Private individual 14, transcript of evidence.

1703 Private individual 21, transcript of evidence.

1704 Private individual 23, transcript of evidence.

1705 Submission 67.

1706 Submission 68.

11.64 Jigsaw told the Committee:

> I have also had clients who have said they have seen a psychologist, they wrote down "adopted" in the same way they wrote down their name and address and practical details, but it did not register as that might be the source of some of the issues.[1707]

Trauma approaches

11.65 The need for clinical services framed through a "trauma perspective" to address the experiences of forced adoption clients has been known for a long time. It was identified in the 2010 Australian Institute for Family Studies report on the impact of past adoption practices, and its subsequent 2012 report on service response. It also featured in the Senate inquiry report in 2012 and the report of the Forced Adoption Implementation Working Group that followed in 2013.[1708] A WA mother who sat on the working group submitted:

> A WA government funded and built specialist network of trauma therapists/psychiatrists/psychologists is long overdue and sorely needed for mothers and adopted person[s].[1709]

11.66 Contributors stated that approaches centred on grief and loss are inadequate when it comes to forced adoption experiences. Those who lived them need specific treatment for trauma.[1710]

11.67 The WA Branch of the Royal Australian and New Zealand College of Psychiatrists submitted that:

> Research demonstrates that children and family members involved in forced adoptions can exhibit a range of responses associated with complex trauma, such as depression, anxiety and post-traumatic stress disorder. … The psychological trauma caused by forced removal of children has lifelong, community and intergenerational mental health consequences.[1711]

11.68 A large number of mothers and adopted people have been diagnosed with PTSD. Some contributors said that they were only really helped when they found a professional who addressed their experience as trauma. One mother related:

> I have in [past] also sort the assistance of at least sixteen separate Mental Health Workers. Only one of these people where of any help to me. She was the Psychologist who treated me for PTSD. I had been told by many Doctors that I probably did have this problem but they never addressed it or referred me to anyone. This lady had worked in the prison system and had encountered many patients with it before. She was a great help to me.[1712]

11.69 'Trauma-informed' training is important for all staff servicing people affected by forced adoption, including public servants. However, ongoing professional practice, training and supervision in therapies to treat trauma are part of what seems to make a difference to people affected by forced adoption.

1707 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

1708 See: Submission 72.

1709 Private submission.

1710 For example: Private submission.

1711 Submission 139.

1712 Submission 104.

11.70 In relation to the services currently available, RAWA FASS provide trauma-informed training and ongoing clinical supervision for their counselling staff, although clients do not generally receive any, or ongoing, therapeutic counselling through the service.[1713]

11.71 The director of Tuart Place said many care leaver clients experienced trauma and maltreatment in the settings they encountered.[1714] Accordingly, the service provides practitioners with specialised practice in trauma:

> The clinical staff have a long experience of working in trauma and they have ongoing clinical supervision in the trauma-informed space. That is such a broad term now that it has become meaningless, but psychotherapy that focuses on issues of attachment, loss and grief are central to the kind of psychotherapeutic counselling that happens at Tuart Place.[1715]

11.72 Tuart Place and RAWA also provide other clients with support about the National Redress Scheme, for which trauma skills are required. Tuart Place testified:

> The Redress process is inherently re-traumatising and highly stressful, so people will often have a relapse during that process and need additional help, and they may feel suicidal, homicidal or at real risk in a variety of ways, so we are acutely aware of the need to work closely with other mental health professionals.[1716]

11.73 A mother submitted that consultation about the treatment itself is a vital part of a trauma-based approach, and of particular relevance to the experiences of mothers in forced adoption:

> When working with individuals who suffer from Complex PTSD it is very important to co-author their treatment plan. Sufferers need to feel as if they are in control and as there is already a power differential built into a client/professional relationship this could trigger the powerlessness, lack of control, helplessness and inability to determine outcomes that was inherent in the relationship between the mother and authority figures in the adoption industry[1717]

Adoption specialists

11.74 Beyond trauma specialists, contributors said they needed specialists in the space of adoption trauma, and forced adoption trauma.[1718] They want a place where people 'get it', and where the context of their experiences is already generally known and understood. Mothers stated:

> You can't just pop in and see any counsellor – they have to be a professional in the adoption area[1719]

> You cannot just talk to anybody about this sort of stuff, especially when you bring in the complication that [my daughter] is dead, as well. The whole raft is a little bit more complicated than it might be in a normal situation[1720]

1713 Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

1714 Dr P White, Director, Tuart Place, letter, 1 May 2024.

1715 Dr P White, Director, Tuart Place, transcript of evidence, Legislative Council, 12 June 2024.

1716 Dr P White, Director, Tuart Place, transcript of evidence.

1717 Submission 70. See also: Submission 139.

1718 For example: Private individual 4, transcript of evidence; Private individual 17, transcript of evidence; Private individual 22, transcript of evidence; Private individual 23, transcript of evidence.

1719 Private individual 7, transcript of evidence.

1720 Private individual 27, transcript of evidence. .

11.75 Adopted people described:

> I was later referred to a Psychotherapist by another Allied Health Professional. This psychotherapist was brilliant. She had experience with other people affected by adoption.[1721]

> The psychologist cannot just be a psychologist who goes, "Oh, yes." They have to understand the impacts. They have to understand what went on for us. … I have gone to so many counsellors and, well, you get the same thing: … "You are lucky to have a family." People still do not get the genetic mirroring. They do not get your need to know. The first time I saw a picture of my mother, I thought it was me. [1722]

11.76 RAWA said support services need to be 'forced-adoption aware', in addition to trauma-informed.[1723] Staff explained:

> Mothers and adopted people have had their trauma and experiences so invalidated for so long that they are often, and understandably, highly sensitive to any further invalidation in their search for support. This is why it is imperative to have staff trained in adoption-specific services. … Specialist training is required to minimise the risk of further harm being perpetrated on this vulnerable population. [1724]

11.77 The Australian Psychological Society echoed this, submitting that clinicians need an understanding of the history and lifelong impact of forced adoption so they can engage with those affected without doing further damage. The Society submitted:

> It is vital, therefore, to ensure that there are enough psychologists and psychiatrists available who are trained to provide psychological and mental health support and treatment to people impacted by forced adoption. There is also a need to ensure that primary health clinicians, such as general practitioners, and other non-clinical service and support providers who may encounter people impacted by forced adoption are educated about the impact of these policies and practices. This will ensure that they can respond sensitively and identify and make appropriate referrals for psychosocial and psychological support and intervention as needed.[1725]

11.78 The staff member managing FASS at RAWA told the Committee that they struggle to refer people because they have not identified any champions for the forced adoption space. They have the relevant understanding themselves, but not the funding capacity. [1726]

11.79 Tuart Place currently provides a specialist approach for care leavers by giving context to family separation and experiences of abandonment.[1727]

11.80 In October last year, the manager of ARCS, testified:

> there should be free specialist counselling. And "specialist" sounds like maybe we think we are special, but we see too many people who have been to people in

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1721 Submission 63.

1722 Private individual 4, transcript of evidence.

1723 Submission 51.

1724 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1725 Submission 91.

1726 Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024. See also: Submission 51a. The Department of Communities' website states that it has a list of independent cousellors who may be helpful in relation to adoption (Department of Communities, *Adoption Support Services*, wa.gov.au, 2024, accessed 25 July 2024). However, when requested the list consisted of just 2 organisations: ARCS and RAWA FASS.

1727 Dr P White, Director, Tuart Place, letter, 1 May 2024.

> private practice who have no idea about forced adoption or the impact of adoption and they still think it is some lovely thing and get on with your life type of stuff. [1728]

11.81 Contributors who found the services of experienced counsellors at ARCS very helpful were concerned that there were no equivalent services available in the event those counsellors were unavailable. For some ARCS's clients, this situation has now crystallised with the death of an ARCS manager and the transition of one psychologist to private practice.[1729]

11.82 Within adoption specialised services, mothers and adopted people need practitioners able to deal with them as discreet groups with their own specific experiences.[1730] These include those stemming from the time of their separation, as well as issues to do with searching, contact and reunion, which is discussed further in Chapter 13.

11.83 Aboriginal people also have complex experiences and need specialised support.[1731]

11.84 An adopted person submitted:

> I would also like to see that Aboriginal people are offered better support as we have lost so much – language, culture, connection to Country, position in community (Elders, Senior people etc) connection to family as we have been raised in a different culture that our birth parents.[1732]

FINDING 56

A larger workforce of qualified counsellors trained in forced adoption-centred, therapeutic approaches to treating trauma is needed to meet the needs of Western Australians impacted by forced adoption.

Trauma specialists

11.85 While both mothers and adopted people experienced abuse as a result of forced adoption in some cases, mothers spoke about an aspect of their experience that went beyond simple trauma. They described the violation of their rights by those in positions of authority:

> I felt from my own experience and listening to the experience of other mothers that counselling delivered through the lens of adoption (grief and loss etc) only touched the surface and had the risk of re-traumatisation. Many mothers viewed their experience as an abusive, violating abduction of their babies. They were overpowered and rendered helpless to prevent that traumatic event occurring.[1733]

> it is essential for those involved in service provision to deeply recognise that their service provision is limited under the adoption framework and does not address the complex mental health NEEDS of mothers resulting from the abuse, trauma and the systemic violations of human rights to both her and her baby.[1734]

> although it has been defended as an unfortunate result of flawed social and medical policy, it can also appear that a pattern of abusive treatment emerges.

1728 J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

1729 For example: Submission 68.

1730 For example: Submission 72; Submission 112; Private individual 20, transcript of evidence.

1731 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1732 Submission 148a.

1733 Private submission. See also: Submission 50.

1734 Private submission.

> What vulnerable young women describe about their treatment are not isolated instances with institutions, government departments, atypical doctors and social workers, but rather their experiences reveal systemic violations of human rights. Young pregnant women were subjected to cruel, inhuman and degrading treatment and this treatment has had lifelong ramifications for the victims, not only in emotional but also very much so in practical, physical terms and the trauma and its effects still continue 50 years, and more, after the event.[1735]

> The biggest frustration for all of us is that there is no counsellor available in Western Australia with enough training and qualifications to even begin to deal with the complex trauma that has been released. All of us need a specialised and structured program so that we can at least try to pick up the pieces and go forward.[1736]

11.86 One mother was contacted by her adopted son in 2011; an encounter that went very badly. She explained the failure of professionals to address the heart of the trauma that surfaced at this time:

> There was no one to help no matter where I turned, I called psychologists but they all wanted to know why I felt like I needed their help so I told them at the mention of adoption they said oh we can help you with grief and sadness, but *that wasn't what I needed help with it was the whole experience of feeling violated at the time of removal and again at contact*. It was horrible, telling them then feeling like they had no idea where to start, which was very disappointing as I ended up feeling worse every time I tried to find help and didn't continue for too long down that track when all I did was wind up at a dead end feeling worse for trying.[1737]

For this mother, the impossibility of finding adequate support led her to attempt suicide.

11.87 In her submission, Dr Christine Cole described being re-traumatised by every therapy she tried in New South Wales until she found out about the Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS), that assists refugees in the state.[1738] The relevance of the STARTTS model is presented in the following box.

[1735] Submission 50.

[1736] Submission 87.

[1737] Submission 98 (emphasis added).

[1738] WA has a similar organisation named The Association for Services to Torture and Trauma Survivors (ASSeTTS).

Forced adoption experiences as organised violence

Dr Cole said that the disempowerment, brainwashing, dehumanising treatment, removal of infants, coercion and deception that mothers were subjected to can be seen as fitting within the following definitions of torture:

> The deliberate use of physical or psychological methods that cause a person severe pain and suffering with the intention of punishing, intimidating .... The torture must be perpetrated by a public official or at his or her direction. (United Nations Declaration Against Torture)

> The deliberate, systematic or wanton infliction of physical or mental suffering by one or more persons acting alone or on the orders of any authority, to force another person to yield. (World Medical Association)

STARTTS stated:

> women who have had their babies forcefully taken are victims of organised violence. We tend to reserve the definition of torture for situations that are created for the purpose of destroying and inflicting harm. Nevertheless, the approach that needs to be taken with anyone that has been a victim of organised violence is to recognise the context in which those violent acts took place, and understand how the victim of those violent acts construed the situation. It is also important to consider the context in which healing and recovery take place, as well as the ongoing impact of the traumatic experiences in the survivor's life. A trauma-focused approach needs to consider both the need to address the impact of the trauma, and include measures designed to enrich the environment around survivors so that it is more conducive to a healing process. This involves working both on the survivors intrapersonal resources and their external resources.

STARTTS applies the hierarchy of care concept so that intervention is not just effective in terms of cost, but effective in bringing about positive life changes. STARTTS Director Jorge Aroche explained their approach as follows:

> STARTTS' model hinges on a recognition that trauma affects people on a biological level, at a psychological level, and at the psychosocial level. It also recognises that the context where the trauma took place and the context where healing and recovery is taking place, are important factors in both mediating the impact of trauma and the effectiveness of recovery. Further, the STARTTS model recognises that while there may be particular traumatic events that affect the survivor, this often triggers a dynamic interaction with other stressors affecting people both at the time when the traumatic event took place and further down the track. Working with the impact of these traumatic events is most effective if we are able to unpack and understand the interaction between these factors, and identify the most strategic point of intervention in each case.
>
> STARTTS' model relies on the notion that people are essentially self-healing organisms, and that they often come to the attention of professionals at a time when this interaction may be locked into a vicious cycle. The task of health professionals is not to resolve every issue, but to reverse this cycle by reducing the complexity of the interaction so as to revert it into what we could call a virtuous cycle. The healing journey should always be a journey of empowerment for the client. The STARTTS model would be appropriate for survivors of forced adoption, although the societal and contextual factors would be different to those impacting someone from a refugee background.

Dr Cole recommended that the STARTTS approach be integrated into support services for mothers who experienced forced adoption practices:

> women who had their babies forcibly taken are victims of organised violence and fit the description of victims of torture and trauma. … The focus is not on adoption per se … this is about the damage caused by separating mothers and their newborns in the context of their surviving that torture. … Why is it that refugees who come to Australia can access highly specialised trauma clinicians whilst citizens who have been tortured and traumatised here cannot?

[Sources: Submission 72; J Aroche, CEO, NSW Service for Treatment and Rehabilitation of Torture and Trauma Survivors, letter, 15 May 2024]

11.88 STARRTS stated that there is a continuum of trauma specialisation within the professional community:

> A trauma-informed support professional would be someone that is familiar with the potential impacts of traumatic events on people's lives at a variety of levels that go beyond the limited range of symptoms that we tend to see in movies and other popular depictions of PTSD. The reality is that an increasing amount of evidence suggests that trauma can impact on the brain and nervous system in ways that interfere with the optimal functioning in various areas.
>
> A trauma aware professional should also understand that the impact of traumatic events can also be reversed but needs careful unpacking of all the factors that continue to contribute to the maintenance of different symptoms associated with this impact. A trauma specialist is somebody who has developed the necessary skills to guide, accompany and support a survivor through the healing and recovery journey, and is able to apply a variety of techniques to assist the client in this healing journey. This must involve the capacity to assist or at least procure the assistance of other professionals to ensure that the survivor's recovery environment is also enriched in this process.[1739]

11.89 From this description, the Committee understands why many of the inadequate therapy experiences stem from a mismatch between the knowledge and skills of the therapist and the more challenging needs of the client. As one submitter said:

11.90 the extent to which these services are able to effectively "reach" those impacted by forced adoption or assist in the psychological impacts on forced adopted persons is in my view, limited.[1740]It appears that mothers who have lived with more complex experiences of trauma most of their lives need urgent treatment from trauma specialists to truly advance. Some adopted people demonstrated that for much of their lives they have been trapped in a cycle of trauma, and such individuals also need sophisticated approaches. The adopted person cited at paragraph 11.27 submitted:

> I have yet to find a therapy that can really deal with preverbal trauma; that is, being separated from the woman who birthed me and left in a hospital for approximately 4 weeks awaiting adoption to strangers.[1741]

11.91 There is an evident dearth of suitably skilled Western Australian mental health professionals to address the deep wounds of forced adoption clients. In addition, those that exist are not

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[1739] J Aroche, CEO, NSW Service for Treatment and Rehabilitation of Torture and Trauma Survivors, letter, 15 May 2024.

[1740] Submission 48.

[1741] Submission 71.

easily found and not sufficiently accessible. One witnessed summarised the situation as follows:

> The department has done a really good job through offering counselling and resources and so on, but it is only an offer. It is not even really a vending-machine model, where you press a button and a counsellor appears. It is: here are the shopping malls where you can find a counsellor today.[1742]

11.92 It is imperative this situation be assessed and swiftly addressed, so people with forced adoption experiences can more readily connect with suitable therapists.

RECOMMENDATION 5

The Minister for Health and Mental Health consult with people impacted by forced adoption in WA and professional representative bodies to commission informed development of:

1) criteria for establishing a mental health practitioner as a specialist in treating trauma in the forced adoption space
2) a public register of WA professionals who meet these criteria and their contact details
3) a means for inviting relevant WA professionals to register
4) a system for assessing applications
5) a system for maintaining, updating, and advertising the register
6) a strategy to quickly grow the number of professionals eligible for the register
7) a plan for periodic review and revision of this arrangement, including through consulting with people with lived experience of forced adoption.

11.93 As STARTTS identified, the context in which healing takes place is highly relevant. One witness, with a positive experience of addiction treatment camps, said it is hard to process trauma while meeting the demands of everyday life. She suggested a rehabilitation camp for adopted people:

> somewhere where they can go and maybe deal with their stuff at one place, and … Spend a bit more time away, like, the environment that you are in when you are trying to deal with trauma has a big impact. … you have to be in the right space to be able to unpack this stuff, and that can be really, really hard to find that support.[1743]

Culturally appropriate treatment

11.94 The WA Branch of the Royal Australian and New Zealand College of Psychiatrists (RANZCP WA) submitted that it is

> essential that services for Aboriginal and Torres Strait Islander peoples who have been impacted by forced adoption are culturally appropriate and responsive. As part of this, mental health services and practitioners must be able to understand the differing impacts of trauma for individuals from different cultural backgrounds and be able to provide culturally appropriate and responsive interventions.[1744]

11.95 FASS and Tuart Place gave evidence about their experience in supporting First Nations clients, although did not specify the framework within which they work.

[1742] Private individual 6, transcript of evidence.

[1743] Private individual 28, transcript of evidence.

[1744] Submission 139. See also: Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

11.96 Aboriginal-controlled organisations such as Yorgum and KSGAC are well-placed to assist clients in this sense. Yorgum provides annual culturally secure, trauma informed services training for all Link-Up staff, and its qualified counsellors offer therapy based on approaches suited to First Nations people. Their clients see these practitioners through facilitated 'healing camps' and 'healing groups', and for pre- and post-reunion counselling.[1745]

11.97 Yorgum stated that 'increased and secure funding is important to provide ongoing services to address the intergeneration[al] trauma.'[1746]

Training

11.98 Lived-experience contributors called for forced adoption-centred trauma-specialist counselling services staffed by trained, qualified and experienced practitioners.[1747]

11.99 Despite ARCS operating for around 40 years, and the creation of FASS, there is a clear lack of suitable professionals to deliver the clinical services required in this space.

11.100 Affected people want increased funding for specialist services, as well as extensive, specific training in treatment of forced-adoption to increase the number of mental health professionals able to provide relevant counselling.[1748] An adopted person gave evidence that:

> Psychologists need to be educated, particularly when a lot of us are over-represented in psychologists' offices. [1749]

11.101 As a result of the 2012 Senate inquiry, in 2016 the Australian Psychological Society (APS) developed a training package for psychologists and GPs. The training aims to up-skill clinicians in trauma-informed evidence-based assessment and intervention approaches specifically for people affected by forced adoption.[1750]

11.102 The package was not comprehensive enough to adequately address mothers' needs, according to the WA mother who sat on the implementation working group. An adopted person echoed this, and also claimed that not enough practitioners had completed the training.[1751]

11.103 APS submitted that their package was reviewed and updated in 2022, and is evaluated on an ongoing basis. The APS recommended the training package as a way of helping WA psychologists and GPs provide specialised care. APS can work with the WA Government to:

- better promote the training package to health professionals in WA
- link WA practitioners to a professional network of health professionals supporting people impacted by forced adoption.

11.104 Given the dearth of suitably qualified practitioners in this area, captialising on resources already developed and available is an easily achievable way of improving outcomes for forced adoption clients.

[1745] C Augusston, Yorgum Link-Up Manager, Yorgum Healing Services, letter, 23 May 2024.

[1746] C Augusston, Yorgum Link-Up Manager, Yorgum Healing Services, letter, 23 May 2024.

[1747] Submission 33; Submission 70; Submission 88; Submission 112; Submission 148a.

[1748] For example: Submission 70; Submission 58a; Submission 59.

[1749] Private individual 4, transcript of evidence.

[1750] Submission 91.

[1751] Private submission; Private individual 1, transcript of evidence.

RECOMMENDATION 6

The Minister for Health and Mental Health:

1) consult with relevant stakeholders to develop and implement a strategy for promoting the Australian Psychological Society's forced adoption training package for psychologists and general practitioners within WA
2) connect WA health professionals to their network counterparts working in this space.

11.105 Further, aspects of STARTTS's model may be beneficial for mothers who survived forced adoption practices, and some adopted people.

11.106 STARTTS is willing and able to tailor training in order to share its 'expertise in dealing with the impact of traumatic events in a context of organised violence'. The organisation may also be able to provide debriefing and supervision.[1752] This upskilling for practitioners in private practice and staff at current service providers may benefit forced adoption clients, and mothers in particular.

RECOMMENDATION 7

The Minister for Community Services tie future funding for forced adoption counselling services to:

1) qualified practitioners completing training and development relating to forced-adoption
2) the provision of evidence-based approaches to treating complex trauma
3) ongoing clinical supervision from qualified professionals specialised in trauma.

Research

11.107 To inform evidence-based practice and support services, contributors and providers also spoke of the need for research into the lived experiences of people affected by forced adoption.[1753] Identified areas included:

- impacts on mothers
- impacts on fathers
- impacts on adopted people, including pre-verbal experiences, addiction, homelessness and incarceration
- data linkage
- experienced impacts of records information and processes
- implications for suicide awareness and prevention
- future adoption policy.

11.108 RANZCP WA also identified this need:

> Further research is required to provide a strong evidence-base for interventions for people who have experienced or have been impacted by forced adoption. Such research will help to ensure that efficient and appropriate support can be provided

[1752] J Aroche, CEO, NSW Service for Treatment and Rehabilitation of Torture and Trauma Survivors, letter, 15 May 2024.

[1753] J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023; Submission 51; Submission 125; Submission 128.

to those who may be at greater risk of mental illness and should be made a priority for WA Government funding.[1754]

11.109 Adoptee Rights Australia requested adopted people be consulted about the forms of research most needed and that they also be supported to study in this field as affirmative action for those with lived experience.[1755]

11.110 The Committee is of the view that additional research will improve services and constitute a worthwhile investment of public money. However, parents and adopted people are aging, with the latter now in middle age. Such research must be timely for it to be useful.

FINDING 57

Research into the experiences of people who lived through forced adoption would improve the evidence-base for practitioners and support providers who service them.

RECOMMENDATION 8

The Minister for Health and Mental Health commence a dialogue with those with lived experience of forced adoption, service providers and the university sector to:

1) establish a post-graduate qualification in treating forced-adoption traumas
2) establish research projects into relevant topics, such as health and mental health impacts, data collection and data linkage
3) incentivise study and research in this area through the provision of scholarships.

Those affected must have choice and flexibility in how they access support

11.111 The inquiry revealed that those affected by forced adoption must have choice and flexibility when it comes to accessing support services.[1756] There are four reasons for this.

11.112 Firstly, because forced-adoption clients reported negative experiences with some support providers.[1757] In particular, the dual roles that individual professionals fill as both managers and therapeutic practitioners in small organisations such as Jigsaw, ARCS and RAWA FASS have, in some cases, created difficult situations for clients who feel they have received ill-treatment and have little recourse.[1758]

11.113 The current manager of FASS at RAWA opined that it would be unwise to lock people into one support provider due to the length of time that people have already been interacting with those currently existing, and the barrier constituted by any negative experiences with them in the past.[1759]

11.114 Secondly, people who lived through forced adoption were disempowered and had no say over what occurred. It is thus important that they have agency in relation to accessing support for dealing with the ongoing impacts of that experience, and the way that support is

[1754] Submission 139.

[1755] Submission 128.

[1756] For example: Submission 128; Submission 139.

[1757] For example: Submission 50; Submission 56; Private submission; Private individual 1, transcript of evidence.

[1758] For example: Private submission; Submission 50.

[1759] Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

delivered. People should also be able to continue seeing the same practitioner if they have already found someone that works well for them.[1760]

11.115 RAWA FASS stated:

> Support services need to be responsive and adaptive. Consumer choice, transparent decision making, service flexibility and the active facilitation of and responsiveness to feedback is imperative for the safety of this group. Services need to be delivered in a tailored, consumer-needs driven model. This population has experienced their identifying trauma at the hands of support services, therefore there is a risk of re-traumatisation with a paternalistic approach to service delivery.[1761]

11.116 Thirdly, each individual has different requirements, and requires a unique plan that responds to their experiences, and the type and severity of their symptoms.[1762] The therapy that works for one may not suit another, and one submitter said that massage or yoga may be more beneficial for some than seeing a clinical psychologist.[1763]

11.117 Most affected people have trust issues and need to feel comfortable with the person treating them.[1764] Contributors consistently said they need to be enabled to find the right practitioner to meet their needs.[1765] For example:

> As adopted people we should be able to choose our own Therapist not be told that we have to use a therapist from a particular agency or list of providers. … Adopted people need to find a therapist that works for them[1766]

11.118 Last, the needs of individuals change over time, and so it is important to find the right person for the right time. As one mother gave evidence:

> It also took me three or four psychologists and a counsellor to get to the right people at the right stage. I think my third one was okay for about a year and a half as I sort of unravelled the grief bit and the guilt bit when she died, and then I moved on to another one who had a bit more experience for the rest of the stuff.[1767]

11.119 Psychologist Margaret van Keppel, who pioneered the research into mothers' experiences that spawned ARCS, submitted:

> A multi modal approach, from multiple providers will ensure that as many "forced adoption" survivors can access the services that will best suit their needs.[1768]

1760 See: J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

1761 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1762 K de Cinque, Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023; J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023.

1763 Submission 39.

1764 For example: Submission 68.

1765 For example: Submission 39; Submission 63; Submission 68; Submission 110.

1766 Submission 63.

1767 Private individual 27, transcript of evidence.

1768 Submission 40.

11.120 An aspect of redress mentioned in evidence as important to forced adoption clients is the capacity to access the therapist of one's choice.[1769]

FINDING 58

People impacted by forced adoption need choice and flexibility in accessing mental health care and support.

Regional access to in-person support poses a further challenge

11.121 Outside of private practice, there is currently no organisation providing specialised counselling for forced adoption in regional WA.[1770]

11.122 RAWA FASS said there was a definite need for outreach because they had clients spread across the regions. However, it is not possible for them to provide services within their current funding.[1771] Although intended to be a 'statewide' service, in reality they accept calls from across the state, and assist clients online or if the client travels to Perth.

11.123 The recent funding announcement for ARCS to provide free counselling to forced adoption clients is statewide in the same sense – it is not an outreach or mobile service.

11.124 Tuart Place services clients by phone (or videolink on rare occasions), but they do not have the resources for outreach. Their experience is that when they offered services to people from smaller towns, there was an element of discomfort (unless meeting with supportive peers). The director opined that the needs of clients in regional areas were probably unmet.[1772]

11.125 The director of Tuart Place said that while they do assist a lot of Redress application clients by phone, remote servicing is not ideal for counselling because many people do not feel comfortable over the screen or phone. Reaching out to regional clients through mail-outs and publications is one way to include them in city-based services.[1773]

11.126 A forced adoption client of RAWA FASS submitted:

> Successful Psychological help is dependent upon successful relationship between the practitioner and the client and needs to be face to face wherever possible.[1774]

11.127 Many regional residents affected by forced adoption said they need psychological services where they live, and that they do not want to travel to Perth for counselling.[1775] Others said their travel to access counselling should be covered.[1776]

11.128 While one regional witness was happy to receive telehealth services via a screen, the RAWA FASS manager said most people are not looking for a phone service.[1777]

[1769] I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

[1770] Submission 110; Dr P White, Director, Tuart Place, transcript of evidence, Legislative Council, 12 June 2024.

[1771] Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

[1772] Dr P White, Director, Tuart Place, transcript of evidence, Legislative Council, 12 June 2024.

[1773] Dr P White, Director, Tuart Place, transcript of evidence.

[1774] Submission 94.

[1775] For example: Private individual 3, transcript of evidence; Private individual 27, transcript of evidence.

[1776] For example: Submission 46.

[1777] Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

11.129 Distance can also mean that there is an unworkable delay for forced adoption clients in accessing face to face services. When asked if regular outreach services would assist, the RAWA FASS client told the Committee:

> Unless something is coming down weekly—because you are not the same all of the time, okay? So there will be something that comes up that triggers a whole pile of anxiety and I do not know what all of the emotions are, but that tightness all comes back and you just cannot function properly. So, in order to work or do things or get out of the house
>
> …
>
> You have got to be able to access in a reasonable time—it is like with Relationships Australia. They said I could have face-to-face and they have got an appointment in two months' time. That is useless to me. There is just no point in that. I mean, I could be perfectly fine then, or not. I do not know. Frankly, come up to Perth and have a counselling session and then drive three hours home—I would not be capable of that. It is just not possible. It needs to be in the regions; it needs to be accessible and the cost needs to be covered. That is all I really can say. … Being in a regional town, there have to be other things. I know that in the city Relationships Australia has a counsellor and a psychologist and you can work with them. They offered a visual support thing; I do not know whether that would work for anyone else, but it certainly does not work for me.[1778]

11.130 The Committee concurs that regional residents need accessible specialised counselling services. It observes that this is a significant challenge, given insufficient specialised practitioners in the metropolitan area.

FINDING 59

Regional residents affected by forced adoption need accessible in-person services or funding to travel to access them.

Peer support is valuable

11.131 Some mothers have been attending independent peer support group Association Representing Mothers Separated by adoption (ARMS) since the early 1980s. Members pay fees and volunteers coordinate meetings and events, handle communications and do advocacy work.[1779] The group was hosted at ARCS for a while, and now meets at the RAWA premises in Belmont where FASS operates. Recently, one of the FASS counsellors has been attending ARMS meetings, at their request.[1780]

11.132 Jigsaw ran monthly peer support groups with the manager/counsellor in attendance. These were mothers only, adopted people only, and a mixed group for mothers, fathers and adopted people.[1781] Some of these groups met socially.

[1778] Private individual 27, transcript of evidence.

[1779] Submission 114.

[1780] Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

[1781] I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

11.133 RAWA FASS offers occasional social functions and activities for mothers and adopted people, both separately and together. They do not include adoptive parents in these groups.[1782]

11.134 Tuart Place advised they would staff regional areas for the purpose of facilitating support groups if a need was identified.[1783]

11.135 Recently, adopted people in the Great Southern have started a monthly support group in Albany. Of this group, one participant said

> they are all the things that we actually really need for help. I do not know that you need a professional all the time.[1784]

11.136 Contributors explained that they found many benefits from peer groups, including the opportunity to share, validation, understanding, social support, resource and information exchange and advocacy.[1785] A mother explained:

> One lady came just because she was so alone. She was about 68 or something, and she had never met another mother, … She was amazed: "I thought I was the only person!" … She has made peace with herself. Prior to that, she was blaming herself, and she has actually made peace with the fact that she had no control. It is that simple[1786]

11.137 One adopted person related her experience of finally meeting others like her:

> I was not alone, and I was not a shitty person but a survivor who has experienced great loss without help without recognition. I now had a group that belonged to me who validated my feelings and experience. I also had found out there is so much more for me discover about my past and the trauma inflicted on me and others. The research is there, the books are there the people are there. But I did not know this I did know how to find this support. How many others are suffering because they don't have this knowledge? Knowledge, recognition and validation is so powerful it changes lives.[1787]

11.138 Connecting to others with similar experiences is valuable in itself, and this example shows that it can also be a gateway to helping people seek professional support.

11.139 Some participants who had negative experiences with the running of formal support groups still found benefit in meeting others near them and building networks of people with similar lived experience.

11.140 Both mothers and adopted people spoke positively about the recent combining of members from a group of adopted people with mothers through ARMS.[1788] They explained that this is especially beneficial because reunions fail or can be difficult. Meeting up, mothers have an opportunity to share their perspectives with the next generation, and adopted people gain insight into the forces at play when they were born. Of this experience, a mother said:

1782 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024. This is an important qualification because, as Submission 72 stated, 'placing women who were exploited for their reproductive labour with those that benefited from it may retraumatise them'.

1783 Dr P White, Director, Tuart Place, transcript of evidence, Legislative Council, 12 June 2024.

1784 Private individual 3, transcript of evidence. Great Southern Adoptee Support Group formed in April 2023 (see Submission 153).

1785 For example: Submission 109; Submission 124a; Private individual 14, transcript of evidence; Private individual 17, transcript of evidence; Private individual 20, transcript of evidence.

1786 Private individual 14, transcript of evidence.

1787 Submission 58.

1788 For example: Private individual 22, transcript of evidence; Private individual 29, transcript of evidence.

> We are giving them love, and they are giving us love, and it is seeming to help us. It is a self-help group.[1789]

11.141 An adopted person reflected:

> often when you talk to your own mother, there is just so much pain there, it is very hard to talk to each other. But if you can talk to another mother who experienced the same things, you are able to kind of ask these very delicate questions and they will not be offended because they are not your mother.[1790]

11.142 Participants saw the potential for more mixed interactions through a dedicated wraparound service for people affected by forced adoption. An adopted person who attended a mixed event at ARCS years earlier said some interactions were difficult because the understanding of each other's experience is not necessarily there, unlike with a dedicated group. However, another reflected that while an attempt at combining the groups had not gone so well in the past, time and aging made it more appropriate.

11.143 Contributors also described negative experiences of the cliques and politics within different communities of survivors, or with facilitators. Another was put off when attending an ARMS meeting hosted at RAWA that FASS asked her to fill in a form with her details. People also spoke of the risk that telling a group of strangers about a traumatic experience can make it appear trivial, or re-traumatise the teller and/or the listener.[1791]

Better support for peer groups is warranted

11.144 Contributors called for an expansion of support groups across WA.[1792]

11.145 In addition, RAWA FASS identified that dedicated groups for fathers, Aboriginal and Torres Strait Islander people and late discovery adoptees would be highly beneficial.[1793]

11.146 The evidence also showed that people need professional input to enhance the therapeutic effect of peer group attendance. Some commented that they or others in attendance are not necessarily learning and growing together, in a healing sense. In addition to peer support, these members seek deep work, or something akin to group therapy.[1794]

11.147 In the context of their meetings at FASS, ARMS members reflected:

> They do offer counselling of sorts if it becomes necessary; in other words, there is a counsellor on the premises, but I do not know that that is necessarily good enough. There needs to be a way forward out of this place that people are stuck in mentally. When they are stuck in what happened, the trauma is so profound it is impossible to share. There are not any words to cover it.[1795]

1789 Private individual 22, transcript of evidence.

1790 Private individual 1, transcript of evidence.

1791 For example: Private submission; Submission 50; Submission 59; Submission 70; Submission 104; Private individual 22, transcript of evidence.

1792 For example: Submission 67; Private individual 17, transcript of evidence; Private individual 22, transcript of evidence.

1793 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024.

1794 For example: Submission 98; Private individual 25, transcript of evidence; Private individual 14, transcript of evidence; Private individual 21, transcript of evidence.

1795 Private individual 14, transcript of evidence.

> Relationships Australia was given the money and then they gave us all a big session with one counsellor. They were really, really good, but they just helped us with everyday life, not really with trauma.[1796]

11.148 Dr Cole submitted:

> The government should only fund groups that are subject to independent oversight, have been thoroughly investigated and work in tandem with a specialised trauma service. Mothers and adoptees are well suited to act as consultants to the government on issues that affect them and in producing more equitable social policy but not to work in a clinical capacity, with very damaged individuals.[1797]

11.149 RANZCP WA submitted that the principles of trauma-informed care include 'acknowledging the impacts of trauma as adaptive, and working from a strength-based framework to facilitate empowerment and recovery'.[1798] This kind of therapeutic intervention is sought by some members of peer support groups.

11.150 The Committee's view is that funding for some groups of interested peers to be run as therapy, within a specialised support setting, may unlock further benefits for members.

11.151 Peer groups may also provide a useful resource for support referral and the research needed to inform a better evidence-base for mental health services for this population.

FINDING 60

Peer groups are generally valuable for people affected by forced adoption and have potential for connecting individuals to further supports, research, and therapeutic benefit.

Other support

11.152 In addition to mental health support, some contributors said they need more assistance with life in general, accessing services, housing, and meeting travel and medical costs.[1799]

11.153 With the passing of time, many people affected by past forced adoption are now of or approaching an age where they require accommodations and gerontology services.[1800]

11.154 An adopted person suggested that home visits for counselling may become a valuable option for older forced adoption clients.[1801]

11.155 As flagged above, the prospect of negotiating the aged care system can be daunting and distressing for those who had negative interactions with institutions in the past. RAWA advised that dealing with institutions, medical services, religious organisations and signing paperwork can be triggering.[1802] People may need specialised support to do so, within a context of understanding. One mother submitted:

1796 Private individual 21, transcript of evidence.

1797 Submission 72.

1798 Submission 139.

1799 For example: Submission 17; Submission 46; Submission 58a; Submission 63; Submission 124a; Private individual 1, transcript of evidence; Private individual 22, transcript of evidence. See also: Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024, p 1.

1800 See: J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023; Submission 125; Submission 128.

1801 Private individual 4, transcript of evidence.

1802 Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

> My experience so traumatic in the home in 1973 that I dread ever being admitted to age care Home and would rather die first then to be institutions again.[1803]

11.156 RAWA said that the case management model used for FASS could be applied to help people with transitioning into a residential environment, which is currently an unmet need.[1804]

11.157 Tuart Place receives federal funding to employ an aged care navigator, and some survivors of forced adoption are included in the groups that service targets.[1805]

11.158 The adequacy of existing services for mental health care, as well as assistance with records, search, contact and reunion, is evaluated in the following chapters, and summarised in Chapter 14.

[1803] Submission 6.

[1804] Relationships Australia WA (Forced Adoption Support Service), briefing, 17 April 2024.

[1805] Dr P White, Director, Tuart Place, letter, 1 May 2024.

CHAPTER 12
Records and official documents

12.1 This chapter examines the current state of affairs for those affected by forced adoption seeking to access records and official documents, and how access can be improved to better support them in the future.

Records

12.2 This section considers the significance of records, current processes for accessing records and barriers people encounter, before setting out what is necessary to better support them into the future.

12.3 Overwhelmingly, contributors recounted the difficulty that they have had obtaining records both now and in the past, and that this compounded their trauma.

12.4 Records include those associated with arranging and facilitating adoptions, medical records for mothers and adopted people, and court records.

12.5 Some records are held by the Department of Communities, while others have been retained by non-government institutions. One collection of records has also been moved interstate.

Access to records is crucial for those affected by forced adoption

12.6 Access to information and records forms a crucial part of picking up the pieces for those affected by forced adoption. This has been known and documented in Australia since at least 1978.[1806]

12.7 The specific adoptions reported to this inquiry occurred between 43 and 76 years ago. Because of such significant passage of time, in many cases the documented records are the only source of clear information.

12.8 It is important to those affected by forced adoption practices that they can understand what occurred, or what was formally represented as having occurred. Because of the ways in which forced adoption took place, many people have no firsthand knowledge of significant events. Records play a crucial role in distinguishing between the truth and lies of what was said to them, and discovering what was done without their knowledge or consent.

12.9 Records also assist by prompting recall of events and details that might otherwise have been forgotten by those affected, which helps them to reconstruct their lived experience.

12.10 The ability to obtain records also allows affected people to inform themselves of their family and connections. This is an important facet in understanding their own identity and background and having a sense of connection to their family of origin.

FINDING 61

Access to personal information and records is crucial for those affected by forced adoption.

12.11 As Chapter 9 identified, medical records, if available, can assist adopted people. Records for genetic relatives can allow adopted persons to assess the potential risk, both to themselves and to their families, of genetic medical issues.

[1806] Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices, Commonwealth*, The Senate, February 2012, p 183.

12.12 In addition to better informing themselves, medical records also allow adopted persons to share information with medical practitioners. This significantly improves their health care.

> I was told nothing of my heritage and 'unknown' is not an option on govt forms, including the census. Yet I can't get some medication on PBS without claiming a certain 'heritage'?[1807]

> I had been variously in contact with the previous Department of Communities in 1984, 1985, 1988 and 1989 regarding family medical history. The fact that four inheritable diseases were identified in my family in the intervening years highlights the need for future rigorous testing. It is imperative that it is understood by governments and acted upon that those who have been raised by people other than their original parents must have access to this health information and genetic testing.[1808]

12.13 Aside from these more tangible benefits, understanding the medical history of their extended family, and being able to answer questions from health practitioners, can be positive in itself. It means that those affected avoid the harm that arises from interacting with others who do not understand the significance of their lived experience with forced adoption.

> When you went to the Drs the question was then asked what the diseases in your family history are. I could never answer that even today with knowing my mother's side I don't know my father's side.[1809]

> What to say when a doctor asks, 'do you have any family history of this apparent illness?'[1810]

12.14 The production of records by government and by adoption agencies also plays an important role in transparency, and the inclusion of affected people, in contrast to their historic exclusion, misinformation, and disempowerment.

> The more you know, the easier it is. Some people probably think that is not the case, but certainly for me and everybody I come across, the more information you have, the better it is.[1811]

FINDING 62

Access to the medical history of their parents and relatives enables adopted people and their descendants to make more informed personal health decisions and to access better health care.

Neither of the 2 current processes meet the needs of people affected by forced adoption

12.15 Submissions indicated that records relating to past adoptions are primarily accessed through 2 processes:

- Applications under the *Freedom of Information Act 1992* (WA) (the FOI Act); and
- Applications for authority under section 82 of the *Adoption Act 1994* (WA) (Adoption Act).

1807 Submission 17.

1808 Private individual 26, transcript of evidence.

1809 Submission 58.

1810 Submission 92.

1811 Private individual 27, transcript of evidence.

12.16 Under the current Adoption Act, it is an offence to disclose or communicate to another person any information contained in a document relating to an adoption or proposed adoption, except in accordance with the Adoption Act or 'any other law'.[1812] This limits the other options available to those affected by forced adoption.

12.17 A small number of contributors obtained records through methods other than those set out above. In some instances, applications were made directly to the Family Court of Western Australia for records held by the Court. In other instances, contributors communicated directly with an officer of an agency or institution and were able to obtain their documents as a less formal administrative process, instead of through the above processes.

12.18 In order to understand many of the issues contributors encountered with the current processes, it is necessary to have a broad understanding of how those processes work. The information below sets out the features of access to records under the FOI Act and the Adoption Act.

The Freedom of Information process

12.19 The FOI Act provides a right to obtain access to government documents, which includes documents held by government agencies. Application under the FOI Act was the most common way contributors accessed records from KEMH.

12.20 The right to obtain access under the FOI Act is limited to government documents. This means that records from non-government entities, such as the institutions that provided private adoption services, are not accessible through these applications.

12.21 The FOI Act has certain limitations. Access to documents can be refused if they are 'exempt matter' under Schedule 1. These exemptions include:

- matter which would reveal personal information about an individual (other than the applicant)[1813]
- matter that would be prejudicial to an investigation or a fair trial, or could endanger the life or physical safety of any person[1814]
- matter that would reveal information relating to the adoption of a child or arrangements or negotiations for or towards or with a view to the adoption of a child.[1815]

12.22 Each of the above exemptions operates together with other parts of the Act and is subject to certain exceptions. For example, personal information will not be exempt if it is information about the applicant themselves.[1816]

12.23 When making an application under the FOI Act, no fees are charged for an application seeking records relating only to the applicant. Applications seeking records which relate to other matters or contain material about third parties involve a $30 application fee, and potential additional charges relating to the work involved in processing the application.

12.24 Applications under the FOI Act are made directly to the relevant government agency. Agencies may provide their application form, and related information through their websites.[1817]

[1812] *Adoption Act 1994*, s 127.

[1813] See *Freedom of Information Act 1992* (WA) Schedule 1 Clause 3.

[1814] See *Freedom of Information Act 1992* (WA) Schedule 1 Clause 5.

[1815] See *Freedom of Information Act 1992* (WA) Schedule 1 Clause 13.

[1816] See *Freedom of Information Act 1992* (WA) Schedule 1 Clause 3.

[1817] For example, the Department of Health website provides information and the necessary form for applicants.

12.25 The procedures set out within the FOI Act do not distinguish between applications relating to past adoptions and other applications.[1818] Applications by those affected by forced adoption are made through a broader framework which was not specifically designed for them. Nothing before the Committee suggested that applications by those affected by forced adoption were treated differently to other applications by members of the public. This is consistent with section 10 of the FOI Act, which provides that a person's right of access is not affected by the reasons given for seeking access (or belief by the agency as to the reasons for wishing to obtain access).

12.26 The general nature of the FOI process benefits those affected by forced adoption by providing them the same access to their own medical records as anybody else. Applications are often processed by people specifically employed and tasked with information management and release responsibilities, who consequently had a reasonably sound understanding of the applicable framework. However, at times, the FOI process is unresponsive to the specific needs of those affected by forced adoption. The resulting limitations and issues are discussed later in this chapter.

12.27 The FOI Act differs significantly from processes under the Adoption Act by creating a positive right to access.[1819] It is oriented towards disclosure, and is enabling rather than restricting. The results of applications under the FOI Act reported to this Committee broadly reflect this. In contrast, the Adoption Act takes a reversed position by first broadly restricting access to documents, and then providing for circumstances of access. This is discussed further below in this chapter.

12.28 Decisions made in relation to applications under the FOI Act are subject to a review process which is set out clearly within the legislation. The initial step for applicants is often an internal review, which occurs within the agency itself.[1820] If the issue is not resolved through this internal review, an external review can be sought from the Information Commissioner. That review can result in a variation being made to the decision, which the agency is obligated to comply with, and which can be enforced in the event of non-compliance.[1821] In many circumstances, if the decision by the Information Commissioner is disputed, a further review can be sought by way of an appeal in the Supreme Court of Western Australia.[1822]

The Adoption Act process

12.29 The second way people can obtain records is the application process provided by the Adoption Act. Section 82 provides for a person wishing to access certain information to apply to the Chief Executive Officer of the Department of Communities (CEO). This application must be in an approved form and must include proof of identity.

12.30 The records available through these applications are limited to those within the 'custody power or control'[1823] of the Department. The Adoption Act requires the Court, Registrar of Births Deaths and Marriages, and entity that had conducted adoption services to provide the CEO with information from their records as directed by the CEO. It also requires that when adoption service providers cease to provide that service, they must transfer related documents to the CEO unless they satisfy the CEO that they have arranged for necessary

1818 With the exception of Schedule 1 Clause 13, noted above.

1819 *Freedom of Information Act 1992* (WA) s 10. See also s 3(3).

1820 See *Freedom of Information Act 1992* (WA) Part 2 Division 5.

1821 See *Freedom of Information Act 1992* (WA) Part 4 Division 3.

1822 See *Freedom of Information Act 1992* (WA) Part 4 Division 5.

1823 See *Adoption Act 1994*, s 88.

access to and safekeeping of the document.[1824] As a result, the records available through the Adoption Act process include a large number of records from other agencies such as Ngala.

12.31 Where an application is made, the CEO is to give authority unless 'they think that there is a good reason for not doing so'.[1825] There is no clarification of what constitutes 'a good reason', which provides significant discretion to the CEO.

12.32 The different records that can be accessed under the Adoption Act include:

- court records of adoption proceedings[1826]
- registration of an adopted person's birth[1827]
- the portion of a registration of birth not stating that there was an adoption or listing the parents[1828]
- non-identifying information in relation to the parties to an adoption that is in the power, custody or control of the CEO.[1829]

12.33 Birth certificates and registrations of birth are considered later in this chapter, when addressing official documents.

12.34 Under the Adoption Act, the provisions setting out access to records apply in the same way to those seeking documents and information relating to contemporary adoptions, and those seeking documents and information relating to historical and/or forced adoptions, with only some small exceptions.[1830]

12.35 Court records in relation to an adoption can be accessed by the adopted person, a parent of an adopted person, an adoptive parent of an adopted person, a sibling of an adopted person if both the sibling and adopted person are 18 or older, and a person who was a party to the proceedings.[1831] No other person has the right to access those court records under the Act.[1832]

12.36 The Adoption Act does not define 'court records'. The Act provides that a reference to a record of proceedings in a court includes a reference to the record kept by the Registrar, and a certified copy or memorandum of an order of adoption under the 1894 Act.[1833] There is no specification of what other records are included as 'court records'. The ordinary meaning of this term[1834] would include all records held by the court in connection with adoption proceedings.

12.37 Provision of court records is subject to the following:

- the applicant must have the CEO's authority (under the Adoption Act)

[1824] See *Adoption Act 1994*, s 94(3) and 94(4).

[1825] *Adoption Act 1994*, s 82(2).

[1826] *Adoption Act 1994*, s 84.

[1827] *Adoption Act 1994*, s 85.

[1828] *Adoption Act 1994*, s 86.

[1829] *Adoption Act 1994*, s 88.

[1830] Note that Sched 3 cl 9 only distinguishes adoptions under the 1896 act for the purpose of transitional provisions relating to the proper terminology, and the age of an adopted child.

[1831] *Adoption Act 1994*, s 84. The Committee notes the transitional provisions in Schedule 3 Clause 9.

[1832] *Adoption Act 1994*, s 84(1).

[1833] *Adoption Act 1994*, s 14.

[1834] A common principle used when interpreting statutes.

- any requirements of the court relating to inspection and release of information generally
- any court order in relation to exclusion of persons from the hearing of the proceedings
- sections 89 and 90 (where the adopted person is dead or cannot be found).[1835]

12.38 Non-identifying information held by an adoption agency can be accessed by the adopted person, a parent of an adopted person, an adoptive parent of an adopted person, a grandparent of an adopted person, a descendant of an adopted person who is 18 or older, a sibling of an adopted person if both the sibling and adopted person are 18 or older, and any other person with a suitable reason for having access.[1836]

12.39 The Adoption Act does not define 'non-identifying information'. However, 'identifying information' is defined as 'any information from which the identity of a person may be ascertained'.[1837]

12.40 The following limitations apply to requests for records (including both court records and non-identifying records from adoption agencies):

- the Family Court of Western Australia is able to make an order to prevent the CEO from giving authority[1838]
- where the application is for access to 'identifying information' in relation to a person with a contact veto against the applicant, the CEO must require an undertaking from the applicant before authorising the release of the information[1839]
- where the information is the subject of an information veto that will become or became ineffective under the 2003 reforms, the CEO is not to release that information unless the person attends an interview with an officer of the Department, and all parties to the adoption and their relatives have been provided with the information, counselling and mediation that the CEO thinks is necessary.[1840]

The current processes put up hurdles and roadblocks

12.41 While some contributors were able to obtain their records, and satisfied with the process, many referred to issues that had been, and continue to be, encountered when attempting to obtain information and records that relate to them.

12.42 Some issues related to previous restrictions on access to adoption information and records that no longer apply. The Committee acknowledges that frameworks for access to adoption information and records were very restrictive in the past, as discussed in Chapter 3. The below section focuses on the issues with current processes, improving future outcomes.

12.43 Issues currently encountered include:

- processing of requests by the same agencies directly involved in forced adoption
- unclear or confusing procedures, and lack of information about accessing records

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1835 *Adoption Act 1994*, s 84(2).

1836 *Adoption Act 1994* s 88. The Committee notes the transitional provisions in Schedule 3 Clause 9.

1837 *Adoption Act 1994* s 4.

1838 *Adoption Act 1994* s 83.

1839 *Adoption Act 1994* s 103. For further consideration of contact and information vetoes, please see the separate section within this chapter.

1840 *Adoption Act 1994* s 79(3). The specific provision resulting in ineffective information vetoes is specified as s 59(2) of the *Adoption Amendment Act (No. 2) 2003*. For further consideration of vetoes, please see the separate section within this chapter.

- errors by agencies when processing requests
- inconsistent outcomes
- 'exempt matters' and personal information under the FOI Act
- identifying and non-identifying information under the Adoption Act
- redaction of records, and inconsistency when it comes to redactions
- no review mechanism for access decisions under the Adoption Act
- destroyed and lost records
- incomplete or illegible records
- provision of summaries or extracts of information, rather than the records themselves
- inability to nominate a person for 'supported release' of records sought under the Adoption Act
- timeframes and delays.

12.44 Difficulty accessing records had an undeniably adverse impact on the operation of this inquiry. In many cases, contributors said they were unable to offer potentially helpful records to the Committee for consideration, because they were unable to obtain those records.

FINDING 63

Some contributors were unable to provide records to the inquiry because they were unable to obtain those records.

FINDING 64

Difficulty contributors had obtaining records adversely impacted the operation of the inquiry.

Processing of requests by agencies and institutions directly involved in forced adoption

12.45 Many contributors raised concerns that the agencies and institutions currently responsible for processing records requests were the same as those involved in forced adoption practices. This generates mistrust in the process and outcomes, and perceived conflicts of interest.[1841]

> How do I know if all information is being disseminated or is the secrecy of past upheld to protect the government and people of the institutions of today?[1842]

12.46 The very practice of having agencies and institutions determine the access of others to their information undermined confidence that the process and result would be proper, independent, and unbiased. This increased frustration and mistrust, and resulted in less trust in the process itself and the released records.

12.47 Some submissions refer to comments of officers dealing with requests under the FOI Act and the Adoption Act. These comments added to the perception that the agency or institution's interests were very distinct from those of the applicant. Many examples indicated apparent impatience, irritation, or frustration with the requests and the contributors who made them. At times the underlying attitude of officers was perceived to be disinterest, which was also noticed and impacted upon applicants.

[1841] Private individual 16, transcript of evidence.

[1842] Submission 58.

> I have found many of the people I have had dealings with there to be unaware of the impact their disinterested attitude has on people the hospital has traumatised.[1843]

12.48 The Committee is of the view that negative staff comments dealing with requests to access records are inappropriate. Contributors found them demeaning and felt they belittled the importance of their records. This undermined trust and confidence in the agencies and institutions and processes they are currently forced to navigate.

12.49 Other submissions referred to queries or demands for applicants to explain why they wanted some or all records.

> She asked me what I wanted them for and what was I looking for, anyway. I said "I am just looking for whatever you can give me. I just want everything. I want to know everything…"[1844]

12.50 The Committee acknowledges that in some cases, these queries may have been motivated by a desire to particularise a request, to locate records of interest and to be of greater assistance. However, in many cases queries were perceived to be a demand to justify why records were being sought. These queries and demands were inappropriate. There are more appropriate methods to seek information in order to particularise an information request. The demands risk disparaging the experience and feelings of people affected by forced adoption by implying their request or desire for documents is not normal or is excessive. In addition to those considerations, the FOI Act provides that a person's right to be given access is not affected by any reasons they give for wishing to obtain access, or the agency's belief as to the reasons.[1845] Requesting reasons or justification for accessing documents could be seen as the officer in question contravening section 10 of the FOI Act.

Unclear or confusing procedures, and lack of information about accessing records

12.51 Many submissions referred to an absence of clear information about:

- the options available to obtain records
- what records could be obtained, including generally and in their specific case
- changes to the law regarding what records could be obtained
- what processes were involved in obtaining records
- their legal position concerning the information provided to them.

12.52 Many people affected by forced adoption only became aware of their ability to obtain records, and how best to do so, from other people affected, support agencies, or this inquiry.[1846]

12.53 The Committee experienced the lack of clarity around processes when seeking to assess them in the course of this inquiry. At times, the application of processes is opaque. The framework leaves certain aspects open to interpretation, and there appears to be inconsistency in that interpretation when it is applied. Results and rules were inconsistent across the submissions provided to us. It was challenging to determine whether any one experience illustrated the normal application of these processes, or whether it was an outlier.

1843 Submission 46.

1844 Private individual 22, transcript of evidence.

1845 *Freedom of Information Act 1992* (WA) s 10.

1846 Private individual 27, transcript of evidence; Private individual 13, transcript of evidence; Submission 110.

The challenges experienced by the Committee when considering these processes provided insight into the difficulty that has been encountered by many contributors.

12.54 Certain contributors had been given an understanding that they could not access records through the FOI Act and could only use the process set out within the Adoption Act.[1847] In one particular case, an officer of the Department of Communities was unable to advise a contributor exactly which clause of the Adoption Act prevented them from accessing some or all of their records.[1848] This indicates that it is likely not only the Committee and those affected by forced adoption who are uncertain of the application of some aspects in the current processes. A decision regarding an application for information and records is a decision by the agency or institution handling the application. Where that agency or institution is unable to adequately explain its reason for arriving at a certain decision, this can give rise to concern that the decision reached was not the right one.

12.55 Some contributors testified they did not have certain documents, and had not requested them, because they had been unaware those documents existed or they would be able to obtain them.[1849]

12.56 Other contributors were told different and conflicting information. One submission referred to all Hillcrest records being unavailable,[1850] while another had been told they were stored in Victoria.[1851] Many contributors only became aware from the Sisters of Mercy submission that documents from some institutions had been moved interstate.

RECOMMENDATION 9

The WA Government develop an accessible online resource that is clear, comprehensive, and up to date providing advice identifying the existing collections of records relevant to forced adoption, where they are held and how the records can be accessed.

Errors by agencies when processing requests

12.57 Some contributors referred to errors made by agencies while processing their requests for records. This contributed to distrust in agencies, and confusion surrounding processes and what records were available. These errors included:

- Being provided with the wrong name for a relative. This included a mother being provided with the wrong post-adoption name for their child, and an adopted person being provided with the wrong name for a parent.
- Being sent someone else's documents. This included being sent documents for a person with a similar name.[1852]
- Having documents sent to the wrong place or person. This included, in 2003, a letter for a mother relating to contact sought by her adopted child being intentionally sent to the mother's sister, as she had successfully nominated her address for contact with the Department with the intention of arranging a surprise, without the mother's

[1847] Submission 46.

[1848] Submission 46.

[1849] Private individual 13, transcript of evidence.

[1850] Submission 50.

[1851] Submission 58.

[1852] Submission 70.

knowledge.[1853] Another example is a contributor who discovered that a letter to them concerning their request had been sent to the wrong email address.[1854]

- Being told there were, or were not, records available for them, only to then be told the opposite.[1855]
- Having their name spelt incorrectly.[1856]

12.58 This does not include the specific issues that occurred in summaries, which have been referred to specifically below.

12.59 An additional issue was the perceived lack of care once an error came to light:

> The way that it got dealt with, it was pretty shocking. It just did not seem like there was any empathy in that person dealing with, you know, what has happened to me.[1857]

12.60 The Committee notes that some errors are unavoidable. However, the number of errors can be expected to increase where the volume of work far exceeds available resources. The volume and nature of errors contributors experienced suggests more resourcing was and is necessary for processing requests. This ensures processing is undertaken in a careful and respectful manner.

12.61 The focus should be on demonstrating appropriate empathy and remorse when errors occur.

Inconsistent outcomes

12.62 A large number of contributors provided records they had been able to obtain, correspondence with the Department of Health and Department of Communities, and information about the results of their various applications for information and records.

12.63 Applications under the FOI Act and under the Adoption Act resulted in very different outcomes. While this was expected because of the different frameworks provided for those processes (as considered above in this Chapter), it is problematic that those affected by forced adoption must navigate 2 different processes. Certain records are treated in a very different manner to others.

12.64 Even when considering applications that were dealt with only under one of these processes, there was a considerable degree of variation in the results. One contributor would be seen to obtain certain types of documents through a request, while another would be refused those documents in their own request.[1858]

12.65 In some cases, the same contributor would receive different outcomes by applying more than once, when there was no apparent change to the legal framework in the intervening period. Those contributors would be refused access to documents that had previously been provided, or would be provided with documents that had existed at the time of a previous application but had not been provided.[1859]

1853 Submission 98.

1854 Private individual 3, transcript of evidence.

1855 Private individual 3, transcript of evidence.

1856 Private individual 3, transcript of evidence.

1857 Private individual 3, transcript of evidence.

1858 For example, one contributor provided copies of the 'character reference' affidavits made in support of adoptive parents, while the contributor who provided Submission 99 appeared unable to obtain copies of those records.

1859 Submission 124a; Private Individual 24, transcript of evidence; Submission 22.

FINDING 65

The current application of the process for accessing records through the *Freedom of Information Act 1992* is resulting in inconsistent outcomes for those affected by forced adoption.

FINDING 66

The current application of the process for accessing records through the *Adoption Act 1994* is resulting in inconsistent outcomes for those affected by forced adoption.

12.66 It is notable that inconsistencies were more common in applications under the Adoption Act than the FOI Act. The Committee is of the view the framework for the FOI Act process and the review processes enshrined in that Act contributed to greater consistency in those applications. This is considered further below in this chapter.

12.67 Some witnesses mentioned having connections or access to those within the system, which they were then able to use in order to gain some progress on their requests.

> The CHAIR: You made the comment that you were like a squeaky door. You obviously kept ringing and pursuing and eventually someone heard you and took the time to find those documents.
>
> [WITNESS]: I think that was only because I am on the committee for the apology that King Edward is formulating. I had access to [Name] and [Name].[1860]

12.68 Other witnesses mentioned having an advocate who was more familiar with the systems and procedures, and perhaps more importantly was familiar with the people on the other end of the telephone, who was able to achieve progress by taking an interest in their request and calling their own contacts within a Department to press for progress:

> I had been trying for nearly a year and I had not heard anything and I rang up again and said, "I've just been waiting months." The social worker [...] answered the phone and he said, "Oh, you've waited long enough. I'm going to search them out and make sure that I get you in here." It was shortly after that that I got the phone call saying that they had been found and I made an appointment to come up and see him.[1861]

12.69 The above examples were positive outcomes for the applicants, because it enabled them to obtain their records. However, the Committee is concerned that not all applicants will be treated in the same manner. Some may obtain favourable treatment while others are left behind:

> You know, for people who are not pushy like I am, they do not even get it.[1862]

12.70 Accessing records should not require those affected by forced adoption practices to have connections or advocates. There should be no need for concern that they will receive a less favourable outcome if they do not have these supports available to them. Instead, there should be consistency to provide confidence that if an applicant follows the processes set out within the applicable framework, they will get a proper outcome.

[1860] Private individual 22, transcript of evidence.

[1861] Private individual 15, transcript of evidence.

[1862] Private individual 22, transcript of evidence.

Exempt matters and personal information under the Freedom of Information Act

12.71 Many contributors shared concerns that records they requested under the FOI Act had been withheld or provided in redacted form on the basis they were 'exempt' under the FOI Act.

12.72 As noted earlier in this chapter, applications for records under the FOI Act were not seen to be treated differently to other applications from the general public. The disadvantages to this were that responses to applications by those affected by forced adoption were not (and in many cases, could not) be flexible and responsive to the needs of this cohort. The leading example was the refusal of certain documents, or their redaction, due to information about third parties contained within those records.

12.73 The most common reason for records being considered exempt was that they contained personal information. Personal information is defined in the FOI Act as:

> …information or an opinion, whether true or not, and whether recorded in a material form or not, about an individual, whether living or dead –
>
> (a) whose identity is apparent or can reasonably be ascertained from the information or opinion; or
>
> (b) who can be identified by reference to an identification number or other identifying particular such as a fingerprint, retina print or body sample;[1863]

12.74 Under Schedule 3 of the FOI Act, matter is exempt matter if its disclosure would 'reveal' personal information about an individual.[1864] However, it will not be exempt if that personal information is about the applicant themselves.[1865]

12.75 Matter will also not be exempt merely because it would reveal details relating to an officer of an agency, or a person performing services for an agency under a contract for services.[1866] Those details include:

- their name
- any qualifications held by them relevant to their position
- the position held by them
- their functions and duties as described in any job description document for the position held by them
- anything done by them in the course of performing or purporting to perform their functions or duties as an officer as described in any job description document for the position held by them.[1867]

12.76 Matter will also not be exempt due to revealing personal information if:

- the individual concerned consents to the disclosure of that matter to the applicant
- the disclosure of the matter would, on balance, be in the public interest.

1863 *Freedom of Information Act 1992* Glossary (applied by section 9).

1864 *Freedom of Information Act 1992* Schedule 1 Clause 3(1).

1865 *Freedom of Information Act 1992* Schedule 1 Clause 3(2).

1866 *Freedom of Information Act 1992* Schedule 1 Clauses 3(3) to (4)

1867 *Freedom of Information Regulations 1993* Regulation 9.

12.77 Mothers and adopted persons frequently used the FOI Act process to seek medical records, usually from KEMH. The 2 most common types of personal information which created issues in those records were:

- the personal information of persons related to the applicant, such as the mother or father where records were sought by an adopted person
- the personal information of staff from the hospital, Department of Communities, or non-government entity (being primarily the entities set out in Chapter 8).

12.78 One contributor encountered these issues when seeking records of their twin, believed to be deceased shortly after birth.[1868] The issue of personal information is also tied to the requirement under the FOI Act that access not be given to a document containing personal information of a third party unless the agency has first taken steps to obtain the views of that third party.[1869]

12.79 The common agency responses to this issue included:

- redaction of names
- redaction of sections of documents (containing more than just names)
- refusal to provide a document
- advising that consent was needed from the other person, and either proposing that the applicant obtain that consent themselves (where the applicant was already aware of the person's identity), or advising that certain persons would need to be contacted by the agency (whether to seek their consent or to obtain their views prior to release of a document.

12.80 The issue of personal information about parents was frequently encountered by adopted persons. This was more common when adopted people were seeking their original birth certificate and registration forms. Both documents ordinarily contain the name of the mother, and in some cases the name of the father. In many cases, adopted people were refused access to these documents, and told that access would not be given unless they obtained consent from the parent/s listed on the document.

12.81 This process was seen to cause multiple issues for people affected by forced adoption:

- Many adopted persons had a strained relationship, or no relationship at all, with one or both of their parents.
- Many adopted persons were concerned that their parent/s would oppose them being provided with the documents.
- Many adopted persons were hesitant to proceed with seeking the documents or to discuss them with their parents, out of concern for the impact this could have on their relationship with their parents, their own mental health, or the mental health of their parents.
- Many parents are now of advanced age and face practical difficulties when required to attend services and prove their identity:

> I do not know what happened with my mother. She refuses to talk about it. She refuses to say anything about it. I asked her to sign documents to get her hospital records and [my twin]'s. She does not leave the house very often. She

[1868] Private individual 4, transcript of evidence.

[1869] *Freedom of Information Act 1992*, s 32(2). Note also the subsequent procedure set out within s 32(2).

> does not have a driver's licence and she has been asked for her to have it signed to identify her.[1870]

12.82 The issue of personal information about staff arose frequently in the evidence. It is common for patient records to contain data entered by staff, which feature the name of the staff member and the time or date for the notation.

12.83 There was some inconsistency seen between contributors who had access to records showing this information, and others who had copies with the information redacted. One contributor noted that the approach had changed over time:

> In recent months, KEMH has begun to redact the names of employees from the medical records of forced adoption applicants. This is a new 'policy', as those who applied for their records in previous years did not experience redactions, as was my experience in 2021.[1871]

12.84 It is problematic for staff details to be withheld from those affected by forced adoption for a number of reasons. Withholding this information is an additional and unnecessary restriction of the information available to applicants. It reduces transparency and accountability. In the course of this inquiry, the Committee observed that the same individuals were involved in multiple cases. Those affected by forced adoption who have formed networks with others should not be prevented from comparing their experiences and coming to the same conclusions.

12.85 The Committee acknowledges that applications under the FOI Act must be handled in accordance with the Act's framework. Where medical information is concerned, there is a degree of care required to ensure that duties of privacy and confidentiality are not breached. In the Committee's view, the issues encountered with documents being refused or redacted based on exempt matters was not due to failures by the agency managing those requests. On the contrary, the issues reflect the limitations of the legislation itself. It was not brought into operation to address the specific needs of those affected by forced adoption.

12.86 Although there is a specific category of exemption for information relating to the adoption of a child,[1872] the Committee did not receive any submissions indicating that this exemption had resulted in access issues.

Identifying & non-identifying information under the Adoption Act

12.87 Many contributors referred to difficulties in applications under the Adoption Act where the records they sought were deemed to contain 'identifying information'.

12.88 'Identifying information' under the Adoption Act is defined as:

> Any information from which the identity of a person may be ascertained.[1873]

12.89 The Adoption Act does not broadly restrict the release of identifying information. However, the provision setting out access to adoption agency records stipulates that 'non-identifying information in relation to the parties to an adoption' can be accessed.[1874] This could therefore exclude identifying information where access is sought through this provision.

1870 Private individual 4, transcript of evidence.

1871 Submission 110.

1872 *Freedom of Information Act 1992* Schedule 1 Clause 13.

1873 *Adoption Act 1994* s 4.

1874 *Adoption Act 1994* s 88.

12.90 We note that the provision setting out access to court records[1875] does not distinguish between identifying or non-identifying information. It is clear that some applications under the Adoption Act can result in the release of 'identifying information', because one section of the Adoption Act sets out steps that must occur in certain cases 'where there is an application under section 82(1) to authorise access to identifying information in relation to a person'.[1876] This should mean that identifying information is not necessarily excluded from all applications under the Act to access records.

12.91 Despite the legislative framework indicating that identifying information could be accessed, in evidence records were withheld or redacted on the basis of containing identifying information. While this was understandable where the records sought could be considered 'adoption agency records',[1877] in some cases this was applied where the records were 'court records'.[1878]

12.92 Inconsistencies in record application outcomes are discussed above. The impact of identifying information on application outcomes was also highly varied. In some cases, applicants were provided with court records containing identifying information. In other cases, they were not. This made it difficult to ascertain the actual practices and procedures in place.

12.93 The Committee encountered further difficulty because the Department of Communities did not routinely notify applicants of which documents had not been provided to them, and the reasons why.

12.94 The Committee requested information from the Department of Communities regarding access to records. The information provided by the Department in response was vague and generalised.[1879] While the response referred to the law, it did not assist the Committee's understanding of how that law is currently being applied by the Department, or what is causing the above issues. The Department also declined to provide internal procedures as requested by the Committee, which would also have been of assistance when considering these issues.[1880]

12.95 The Committee reached the view that the Adoption Act process is being applied in a way that favours the restriction rather than release of records. In the absence of clear information from the Department about its internal procedures, the Committee formed the view that this restrictive application is due to the historic context of adoption legislation, which for many years only dealt with adoption records for the purpose of restriction. While the 1994 Act reflected significant change by opening access to records, viewed through the lens of 2024 it has not gone far enough to ensure all necessary records can be accessed.

12.96 Access to identifying information and records under the Adoption Act is also significantly impacted by contact and information vetoes. Those issues are considered separately in a later section of this chapter.

1875 *Adoption Act 1994* s 84.

1876 *Adoption Act 1994* s 103.

1877 As described above, these are encompassed by s 88 of the *Adoption Act 1994* which is framed to extend to 'non-identifying information'.

1878 As described above, this is not framed in a way that distinguishes between identifying or non-identifying information.

1879 Department of Communities, email, 7 June 2024, responses to questions 25, 26, 27, 28, 36, 37.

1880 Department of Communities, email, 7 June 2024, response to question 27.

Redaction of records

12.97 Many contributors explained that the records they received had been redacted and provided copies of those redacted documents for our consideration.

12.98 The withholding of parts of existing information is commonly received negatively by people who obtain their records:

> it is so traumatising to get bits and pieces and on top of that black out information that leads you to believe there is little truth telling[1881]

> You get blanked-out stuff, and you go, "Okay, so is this a lie? Is this true? Is this a secret, whatever?"[1882]

12.99 The impact of redactions is made worse by the lack of specific explanation or provision of context for what has been redacted. This made it difficult for contributors (and the Committee) to understand why information was redacted and to assess whether the redaction was reasonable.

12.100 In some cases, large sections of documents had been redacted. The Committee does not consider that the entirety of those sections would have consisted of material that required redaction. Instead, redaction to this extent suggests an unnecessarily restrictive approach being taken to the release of information and documents.

12.101 The Committee noted the method of redaction. In many cases, redactions were made by using black boxes to cover information. However, in certain cases, 'redactions' were not black, and were given effect by either using white boxes to cover information or deleting a block of information from a document.

12.102 When white 'redaction' is used on a white page (which is the colour of most records sought by those affected by forced adoption) it becomes difficult, and at times impossible, to determine what parts of the page contain information that has been redacted, and what parts have never contained information at all.

12.103 The Committee considers the use of white redaction or deletion of information to be inadequate. Where documents are redacted, it should be clear to the recipient what has and has not been redacted. The best method for this is to use black boxes, which is common practice. Where documents are redacted, those affected by forced adoption should also be provided with an explanation for what the information was (for example, the name of a staff member) and the reason for its redaction.

Destroyed and lost records

12.104 Many contributors shared their grief at being told that the records they were seeking had been destroyed, damaged, or lost. One common explanation was documents had been destroyed in a fire or flood. Another common explanation was the documents had been destroyed deliberately by the agency or institution as they were not required to be kept. The Committee acknowledges that the expectations of record keeping have changed significantly over the course of the last century.

12.105 One mother was told in 1990 and 2001 that her KEMH records had been destroyed, only to be provided a bundle of them in 2022.[1883]

1881 Submission 58a.

1882 Private individual 4, transcript of evidence.

1883 Private individual 29, tabled paper 1.

12.106 Some applicants were told that related microfiche records have deteriorated and could no longer be provided.[1884] Some records had been copied from microfiche before this occurred, while others had not, which suggests that either the deterioration of microfiche was sporadic and unpredictable, or that it was known to be an issue before those records were beyond saving.

12.107 In some cases, contributors were forced to experience their records being lost even as they followed the processes to access them:

> My doctor contacted KEMH in July 2008 by telephone and email asking for my records. We were informed by [...] the Information Officer Mediation and Legal Support Service person that the original file was destroyed but there was a microfilm believed to hold my information and that they would send it to me once it had gone to the legal department to be checked. My doctor did a follow up and we were told that the microfilm had been misplaced is now missing and they were trying to find it. I didn't hear from them at all or receive my information or my son's.[1885]

12.108 The destruction and loss of records was not limited to older records from the early half of the 20th century. For example, one contributor born in KEMH in 1971 reported that they had been told there were no records available for them.[1886]

12.109 Many people affected by forced adoptions arranged by non-government entities have found there are little to no records available for them, whether because those records were never kept, or because they were destroyed:

> One of my biggest issues is I keep getting told it was a private adoption—again, did not have to supply any information. Private hospital. Did not have to supply any, or it is lost. I do not understand why private; I still do not.
>
> ...
>
> I have seen other adoptees' information, not a private, and it is a lot more extensive than mine.[1887]

12.110 Many contributors felt that the loss of their records reflected carelessness and lack of appreciation of their significance. Others voiced concern that they did not know whether to believe the records had truly been destroyed, and a suspicion they still existed but were being withheld.

> The lack/ incorrect or unavailable information about me was even more traumatising than I would ever realise. The anger I feel is overwhelming there is too many holes in my story too much information denied. I feel powerless I feel like I was a commodity that was bought and sold.[1888]

12.111 The difficulty or inability to access records is a source of further harm. It prevents healing and reinforces the lack of 'agency' or control over processes that profoundly affect applicants.

> I mean, this is part of my life and it is part of my healing and I cannot access that.
>
> ...

1884 Submission 110.

1885 Submission 70.

1886 Submission 111b.

1887 Private individual 4, transcript of evidence.

1888 Submission 58a.

> You were always relying on someone else to give you information, and then if it is private, you do not find it.[1889]

Incomplete or illegible records

12.112 Some records are of little use to those affected by forced adoption, because at the time of their creation those records were not created correctly, in full, or in a tidy manner. Some provided records were poor quality photocopies of messy handwriting. Better quality copies were needed by contributors if there was to be any opportunity for them to decipher the writing.

12.113 The most prevalent example of information missing from records is the absence of the names of fathers on birth documents. From 1949 to 1970, a father's consent to adoption could be dispensed with by the Court.[1890] From 1970 onwards, the consent of the father was not required at all.[1891]

12.114 From 1963 onwards, the *Registration of Births, Deaths and Marriages Act 1961* provided that the father of an illegitimate child would not be on the register as the father unless the mother provided the particulars, and the father provided a statutory declaration declaring that he was the father.

12.115 Because of these laws, records from 1963 onwards rarely contain the details of the father. From the perspective of those arranging the adoption, the details of the father would have been seen as at best unnecessary and at worst a potentially complicating factor. From the perspective of the Court and Registrar of Births, Deaths and Marriages, they were not needed.

> The name, age, occupation and address of my daughter's father IS included on the social worker's notes…on my Welfare file. Yet his name is not included on the Birth Information Paper, and his status is recorded as 'not stated' on the copy of the Application for 'Certified copy of Birth Registration'…[1892]

12.116 With the details of the father absent from primary documents, many of those affected by forced adoption use other research and investigative methods to identify and connect with their fathers. Those experiences and methods are discussed in the next chapter.

12.117 This Committee cannot correct the historic law and practices which led to fathers being excluded from crucial documents during the forced adoption era. However, official documentation and the current process for adding fathers to birth records is discussed further below in this chapter.

Provision of summaries or extracts of information, rather than the records themselves

12.118 Many contributors referred to receiving summaries of information, rather than documents, in response to their requests through the Adoption Act. At times, this included 'extracts', which were a recreation of information contained within actual records.

1889 Private individual 4, transcript of evidence.

1890 See *Adoption Act 1897* s 5(7).

1891 See *Adoption Act 1897* s 4A.

1892 Private individual 26, letter of correction.

12.119 The Department confirmed this remains a current practice and stated:

> A summary of information is provided in circumstances where an applicant is eligible to receive non-identifying information and a document would disclose identifying information about a third party.[1893]

12.120 Withholding the actual documents from applicants in order to provide a summary or extract of what was considered relevant information was poorly received. In the Committee's view, it is unnecessary and inappropriate for agencies to insert themselves into information access processes in this way. It suggests that they are best placed to decide for the applicant what is and is not relevant for them, and what they should and should not know about their past. Their involvement in this aspect is neither desired nor of any value to applicants.

12.121 In many cases, summaries or extracts contained information which was incorrect. This caused further harm:

> When I contacted King Edward Memorial Hospital for documents into my adoption, I was sent more lies, a cute letter written by … the Social Worker in Post Adoption Services. She wrote explaining that my parents were very much in love, and wanted to marry but my father's parents wouldn't let them. My biological parents were not keen to relinquish me for adoption but had to. I have since been told his parents didn't even know I existed. I do not what the truth is here.[1894]

12.122 In some cases, like the above example, the summaries appeared to rely on the narratives provided by the official records from the era. This is a harmful practice where it is already apparent from past inquiries that those records can contain misrepresentations.[1895]

12.123 In certain cases, the inaccuracy extended beyond mere error or the repetition of previous historic misrepresentations. In particular cases it appeared to be an attempt at whitewashing. In certain cases, the information was inconsistent with actual records held by the Department at the time of providing the summary. The prevalence of this issue caused the Committee concern.

12.124 Recipients of summaries told the Committee that, taken together, being presented with their own experiences alongside the information collected on prospective adoptive parents at the time reproduced the trauma and de-valuing they experienced through forced adoption. About reading the summary provided to her, one mother stated:

> I felt like they were sort of glorified and I was nothing. These wonderful people had come to take my son when I did not really have a choice; I had no voice.[1896]

12.125 The Committee considers the provision of summaries or extracts rather than actual records to be wholly inappropriate and inadequate for the needs of those affected by forced adoption.

Inability to elect a support person for 'supported release' of records under the Adoption Act process

12.126 Contributors described that information new to them revealed in received records was extremely upsetting. The difficult discoveries people make at this moment include:

1893 Department of Communities, email, 7 June 2024, response to question 36.

1894 Submission 13.

1895 Or errors. See Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, pp 88, 305, 306; Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, p 255.

1896 Private individual 25, transcript of evidence.

- For mothers and fathers:
    - their baby was not with adoptive parents as they had been told
    - their baby was with adoptive parents before consent was signed
    - their own parents had signed an affidavit supporting their child's adoption
    - their baby was in institutional care for an extended period
    - their child was not adopted for years
    - adoptive parents were not who they were told they were
    - there were forces in play during the adoption process that they were unaware of
    - their names were not recorded properly or at all, meaning that their children would not be able to find them.
- For adopted people:
    - they were in institutional care for an extended period
    - their parents did or did not sign consent for their adoption
    - their grandparents did or did not support their adoption.

12.127 However, when seeking records under the Adoption Act, applicants are not able to designate their own support person to receive the documents and assist with a 'supported release'. This was raised as an issue by those affected by forced adoption, and also by support agencies.

12.128 In practice, this has meant that applicants receive communications concerning their request, and their documents and information, directly. A trauma-informed approach to records access would permit applicants to designate a support person to receive any documents, information, and/or communication regarding their application, on their behalf, if they wished to do so.

12.129 At the hearing on 18 September 2023, the Department stated that it provided a 'supported release' of records.[1897] In response to a request for further information about this supported release, the Department stated it is provided through the Department, by Child Protection Workers and a Senior Child Protection Worker. They are not required to have counselling qualifications.[1898] The benefit of this service is limited because it is offered through the Department, using their resources, rather than allowing applicants to use their preferred external support.

12.130 The Department advised that people are able to receive their records themselves and then access a support person of their choice to go through the information with them. However, many applicants have been waiting for their records to arrive for an extended period. It is unkind and harmful to expect them to simply hold those records, and not to read them until they attend an appointment with their support person. In the Committee's view, the inability for people affected by forced adoption to have records sent directly to their nominated support person or service exposes them to further and avoidable risk of harm.

12.131 The Department of Communities stated they were unable to send requested records to a nominated third party because of statutory responsibility and privacy restrictions under the Adoption Act.[1899] This was not seen to be a problem for records obtained under the FOI Act.

[1897] Department of Communities, transcript of evidence on 18 September 2023.

[1898] Response to question 20, attached to Department of Communities, email, 7 June 2024.

[1899] Response to question 20, attached to Department of Communities, email, 7 June 2024.

Timeframes and delays

12.132 A support provider stated that although WA provides more information than some other states, 'it comes at the cost of having to wait for that information to be collated'.[1900]

12.133 Many contributors mentioned the delays they faced when attempting to obtain records. In many cases, some spent decades re-applying for records each time the law changed, and waiting for the outcomes of their applications.

> I feel that the processes I have had to go through to try and find information, get a birth certificate that has my real name, my mothers name, is one that makes me feel like a piece of chicken sh** on a battery hen farmers shoe.[1901]

all this red tape that we go through and the not knowing has got to stop. It has to stop.

- Private individual 3, transcript of evidence

12.134 Parents and adopted people affected by forced adoption are an aging cohort. It is crucial that information and records are provided as promptly as possible, to ensure there is adequate opportunity for them to be considered and used for their benefit.

12.135 Under the current processes, contributors recalled significant waits of 8 or 18 months to receive their records. The Department of Communities explained difficulties in locating and collating records at the hearing on 18 September 2023. The Department of Health reported similar challenges with KEMH. Those difficulties were noted by the Committee.

12.136 The Department of Communities reported at the hearing on 18 September 2023 that it increased staff resourcing for processing of requests. This was followed by a noticeable improvement in the wait times reported to the Committee by contributors. Currently, the reported wait times are approximately 3 months.

12.137 Other issues arise during the process of seeking records which introduce additional delay. These include:

- review and redaction of records
- unclear processes and lack of information
- changes to law resulting in repeated applications to obtain the newly available records
- mistrust in system and processes resulting in repeated applications to 'see what shows up' this time.[1902]

12.138 One contributor noted that they had been informed the process of obtaining their records through FOI would be faster, if they allowed the redaction of the names of medical staff. Similarly, contributors explained they were encouraged by Department staff to only apply for non-identifying information, as that simpler request would produce a speedier outcome.[1903]

12.139 Personal information as an issue affecting access to records has been considered above under a separate heading. The Committee considers it inappropriate that those affected by forced adoption must choose between faster access to limited records or obtaining those records in full.

1900 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

1901 Submission 123.

1902 The Committee notes that, as mentioned earlier in this chapter under the heading 'inconsistent outcomes', repeated applications have resulted in some success for those affected by forced adoption.

1903 Submission 58; Submission 58a; Private individual 4, transcript of evidence.

Lack of availability of review for access decisions under the Adoption Act

12.140 Unlike the FOI Act, there is no legislated process for review, whether internal or external, of CEO decisions on authority applications under the Adoption Act.

12.141 The Department stated if a person was dissatisfied by a decision to refuse access:

> there is an escalation process within the Adoption Services team whereby a Team Leader or the Director of Adoption Services may review the decision.[1904]

12.142 However, other responses from the Department noted:

- there was one Team Leader within the post-adoption services team, and one Team Leader within the broader Adoption Services Team[1905]
- all requests under section 82 were subject to final review by the Team Leader, who decides what information is released[1906]
- staff within the post-adoption services team reported to the Team Leader of Adoption Services.[1907]

12.143 The review process described above is not sufficiently robust. Internal review of decisions should be dealt with by a specific person. The person determining the review should have specialised knowledge of past adoption, including forced adoption, and the legal framework. Neither the Team Leader nor Director of the broader Adoption Services Team would be expected to have this necessary knowledge and experience. However, it would also be unhelpful for the Team Leader of post-adoption services to review the decision, given they made that decision.

12.144 Although the Department provided information about the internal review process, there was no evidence of such a process occurring for any of the application information provided to the inquiry. The lack of legislative framework for an internal review process contributes to these issues.

12.145 When responding to the above query, the Department also referred to its complaints process. A complaints process is not a substitute for a robust internal review process.

12.146 This chapter has set out many of the issues encountered when those affected by forced adoption seek access to records. A clear and publicly available procedure for internal and external review of decisions would provide applicants with a way to attempt to resolve their concerns and grievances with the current Adoption Act processes. In doing so, it could also assist the Department of Communities by bringing awareness of any shortcomings, misconceptions, and practice issues.

12.147 External review also improves transparency and accountability. Given the historic context, the Committee considers that these aspects should be a priority for the Department of Communities.

12.148 As already noted, a higher degree of inconsistency was seen in the results of applications under the Adoption Act than under the FOI Act. A significant reason for this is the different legislative framework and the availability of a review processes for applicants.

1904 Response to question 35, attached to Department of Communities, email, 7 June 2024.

1905 Response to question 15, attached to Department of Communities, email, 7 June 2024.

1906 Response to question 31, attached to Department of Communities, email, 7 June 2024. It was not clear whether the Team Leader referred to was the Team Leader of post-adoption services or the Team Leader of Adoption Services.

1907 Response to question 30, attached to Department of Communities, email, 7 June 2024.

FINDING 67

The current process for access to records and information results in inconsistent outcomes and further harm to those affected by forced adoption.

Moving forward: What is needed?

12.149 The Committee is of the view that the provisions for access to information and records under the Adoption Act are not meeting the needs of those affected by forced adoption. Access to information and records requires significant reform.

12.150 Multiple features are required in a new scheme for access to information and records to address current issues. These are:

- Applications to access information and records under the scheme should be managed by a standalone unit. It is not appropriate for the Department of Communities to perform this role due to the significant role it has played in past forced adoption.
- A separate enactment dealing with access to information and records relating to adoption.
- Records currently held by the Department of Communities should be transferred to the unit dealing with applications under the scheme.
- Records currently held by entities or institutions which previously provided adoption services should be provided to the unit dealing with applications under the scheme.
- Records from the Department of Communities should be reviewed, catalogued, and digitised as a matter of urgency.
- The new unit should be adequately resourced to process applications within 3–6 months, except in exceptional circumstances.
- Applications under the scheme should encompass information and records about the adoption itself, and also about the early life of an adopted person.
- Applications under the scheme should also encompass medical information relevant to the health of an adopted person or their descendants.
- Redaction should only be used where it is absolutely necessary, and to the minimum extent necessary. Redaction should occur in black or another colour that is easily distinguished from the rest of the record concerned. Labels providing context about what is redacted (for example, the label 'Godmother') should not be redacted. Unless it is apparent from the remaining information on the record, applicants should be provided with information about the nature of what has been redacted. Staff details should not be redacted. Identifying information or details of third parties should not be redacted unless they are completely unrelated to the applicant's matter (for example, the names of other person which are listed in a registry book on the same page as the applicant).
- Summaries or extracts should not be provided to applicants.
- Applicants should be provided with a list or index of records that exist. They should be informed at the conclusion of their application which of these documents have been provided in full, which have been provided in a limited form, and which have not been provided at all. In relation to each document that has not been provided in full, an applicant should be provided with written reasons as to why.

- There should be clear and legislated pathways for internal and external review of decisions made regarding access. Applicants should be informed of these pathways at the conclusion of their application.
- The new scheme should include a provision equivalent to section 83 of the Adoption Act. Where there is an existing court order under section 83 of the Adoption Act, this should be automatically converted to apply to the new scheme.

12.151 One example of a scheme for accessing information and records is Ireland's *Birth Information and Tracing Act 2022*. Specific features of that Act which could be applicable in WA include:

- It provides for access to birth certificates and birth information, 'care information', 'early life information', and medical information relating to genetic relatives.
- Provisions are grouped into parts which relate to adopted persons, relevant parents, and relevant relatives. This makes it easier for applicants and authorities to understand what different people are able to access.
- Provisions for medical information relating to genetic relatives strike a good balance between the protection of privacy, and the needs of adopted people and their descendants. Medical records of genetic relatives can be provided where the relevant body is satisfied that the information is relevant to the health of the person seeking it. That consideration is guided by the Act and guidelines that can be issues by the Minister. The records are provided through the person's medical practitioner. When providing the medical information, the name and relationship of the person is not disclosed to the applicant.

RECOMMENDATION 10

The WA Government give urgent consideration to the introduction of legislation in the next Parliament that incorporates the following features:

1) A separate act dealing with access to information and records relating to adoption.
2) Applications to access information and records under the scheme be managed by a standalone unit responsible for managing adoption information within the Department of Justice.
3) A clear object under the Act to ensure those affected by adoption have access to information about themselves and their lives, including their early care and their medical needs.
4) Records currently held by the Department of Communities relating to forced adoptions be transferred to the unit dealing with applications under the scheme.
5) Records currently held by entities or institutions which previously provided adoption services be provided to the unit dealing with applications under the scheme.
6) Records from the Department of Communities be reviewed, catalogued, and digitised as a matter of urgency.
7) Applications under the scheme provide for access to information and records about the adoption itself, and also about the early life of an adopted person. This includes medical records.
8) Applications provide for access to medical information relevant to the health of an adopted person or their descendants.
9) Redaction only be used to the minimum extent necessary.
10) Summaries or extracts not be provided to applicants.

11) Applicants be provided with a list or index of records that exist, and information as to what has been provided, what has not, and the reasons for this.

12) There be clear and legislated pathways for internal and external review of decisions made regarding access.

13) The new scheme include a provision equivalent to section 83 of the *Adoption Act 1994* (WA). Where there is an existing court order under section 83 of the *Adoption Act 1994* (WA), that order be converted to apply to the new scheme.

12.152 The new unit referred to in Recommendation 10 above will require adequate resourcing to process applications within 3–6 months, except in exceptional circumstances.

12.153 Any of the actions identified in Recommendation 10 that can be implemented without the necessity for legislation should proceed immediately.

Official documents & identification

12.154 Many issues with records identified by contributors related not just to access but to the actual state of official documents. These include extracts of birth, birth certificates, death certificates, and the ability to use certain documents as legal identification documents.

12.155 Chapter 3 considered the developments of the law regarding adoption, including the law regarding birth certificates, names, and how (and whether) parents were listed. The following three issues were seen:

- current birth certificates available to adopted people do not list their parents or refer to their adoption. Their original birth certificate, or birth extract, may list their parents but is not a valid document for identification purposes.
- many original birth certificates and birth records for adopted people do not provide the details for their father.
- adopted people are not listed as children on their parents' death certificates, and parents are not listed as parents on their adopted children's death certificates.

Integrated birth certificates

12.156 As detailed in Chapter 3, following amendments in 1926, the making of an adoption order resulted in a child's original birth certificate being superseded by a new birth certificate, which listed the details of the adoptive parents and not the parents. While adopted people can obtain their original birth certificate,[1908] it is labelled as a superseded document or 'not for official use' and cannot be used by them for formal purposes such as proof of identification – see Figure 18. Instead, adopted people are only able to use their second birth certificate, listing their adoptive parents, as identification.

12.157 Contributors expressed different ideas about what they would like to see to address this issue. Some preferred to use only their original birth certificate or post-adoption certificate as the proper certificate for formal purposes. Others seek the freedom to use either of the certificates.

12.158 One approach which has been considered in the past, and was referred to by multiple contributors,[1909] was the use of 'integrated birth certificates'. An integrated birth certificate (sometimes referred to as an 'IBC') is a single certificate which lists a person's parents and

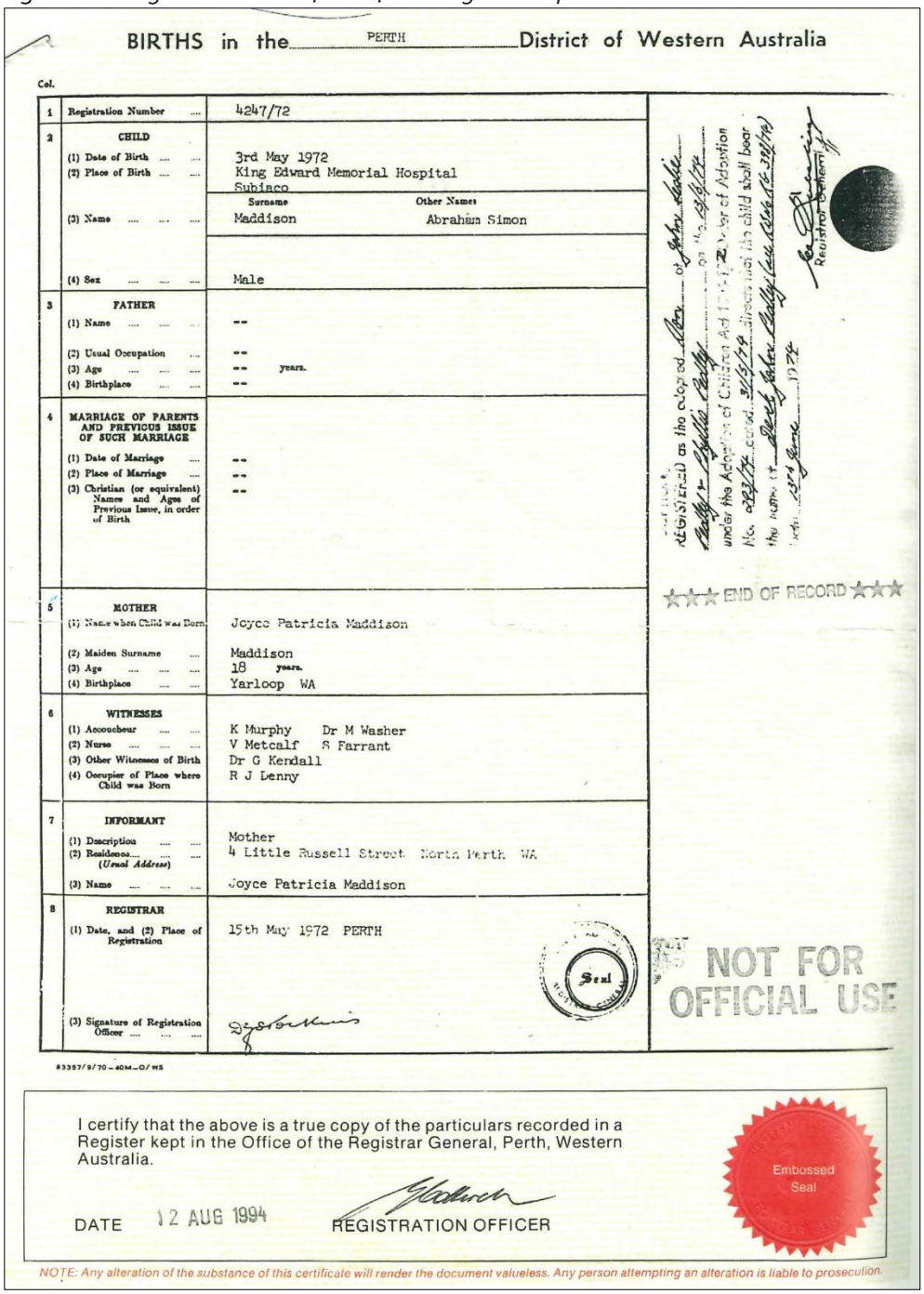
[1908] Provided that there was an original birth certificate. Amendments to the *Adoption of Children Act 1896* created a situation in which a child's birth could be registered through their adoption, which meant that the births of some children were not registered beforehand, and no birth certificate existed for them prior to their adoption.

[1909] Submission 15, Submission 67, Submission 70, Submission 71, Submission 102.

their adoptive parents. This certificate can then be used as a formal document, including for identification.

12.159 The Senate inquiry into Commonwealth Contribution to Former Forced Adoption Policies and Practices[1910] considered birth certificates and identification.[1911] The inquiry report recommended that all jurisdictions adopt integrated birth certificates.

Figure 18. *Original birth certificate following an adoption order*



BIRTHS in the PERTH District of Western Australia

Col.

1	Registration Number	4247/72
2	CHILD	
	(1) Date of Birth	3rd May 1972
	(2) Place of Birth	King Edward Memorial Hospital Subiaco
	(3) Name (Surname / Other Names)	Maddison / Abraham Simon
	(4) Sex	Male
3	FATHER	
	(1) Name	--
	(2) Usual Occupation	--
	(3) Age	-- years.
	(4) Birthplace	--
4	MARRIAGE OF PARENTS AND PREVIOUS ISSUE OF SUCH MARRIAGE	
	(1) Date of Marriage	--
	(2) Place of Marriage	--
	(3) Christian (or equivalent) Names and Ages of Previous Issue, in order of Birth	--
5	MOTHER	
	(1) Name when Child was Born	Joyce Patricia Maddison
	(2) Maiden Surname	Maddison
	(3) Age	18 years.
	(4) Birthplace	Yarloop WA
6	WITNESSES	
	(1) Accoucheur	K Murphy
	(2) Nurse	V Metcalf
	(3) Other Witnesses of Birth	Dr M Washer, S Farrant, Dr G Kendall
	(4) Occupier of Place where Child was Born	R J Lenny
7	INFORMANT	
	(1) Description	Mother
	(2) Residence (Usual Address)	4 Little Russell Street North Perth WA
	(3) Name	Joyce Patricia Maddison
8	REGISTRAR	
	(1) Date, and (2) Place of Registration	15th May 1972 PERTH
	(3) Signature of Registration Officer	

REGISTERED as the adopted ... of ... under the Adoption of Children Act ... No. ... dated ... the name is altered to ... Registrar-General

★★★ END OF RECORD ★★★

NOT FOR OFFICIAL USE

83357/9/70—40M—O/WS

I certify that the above is a true copy of the particulars recorded in a Register kept in the Office of the Registrar General, Perth, Western Australia.

DATE 12 AUG 1994 REGISTRATION OFFICER

Embossed Seal

NOTE: Any alteration of the substance of this certificate will render the document valueless. Any person attempting an alteration is liable to prosecution.

[Source: A Maddison, *Crazy Bastard*, Wakefield Press, Mile End, South Australia, 2023, pp 151-152, in Submission 112]

[1910] Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012.

[1911] Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, Chapter 12.

12.160 The perspectives of contributors to this inquiry towards integrated birth certificates varied, but often supported their introduction. [1912]

12.161 ARMS (VIC) supported all Senate Recommendations and asked to bring urgency to the implementation of those not yet implemented.[1913] This includes the recommendation for integrated birth certificates.

12.162 Adoptee Rights Australia noted that integrated birth certificates do not solve issues in the addition to or correction of names on certificates.[1914] They also commented that these certificates can be seen as insulting because they list the adoptive parents who were not involved in the birth.

12.163 One contributor did not support integrated birth certificates on the basis that they considered this would be a breach of their privacy. This contributor wished to have their parents on their birth record, but not on any forms required to provide identification.[1915]

12.164 Some contributors also expressed different ideas, including the suggestion that they be free to use either the birth certificate listing their parents, or the post-adoption birth certificate listing their adoptive parents.

12.165 As was noted in the Senate inquiry, this is an issue which has legal and technical complexity. Birth certificates are legal documents used for identification. If adopted people had 2 equally valid birth certificates, each with different information, this could lead to confusion and likely refusal by government or institutions to accept either certificate as valid identification out of concern for potential fraud or identity theft.

12.166 It is challenging to balance the legal and technical considerations against the needs of adopted people. As was noted by the Senate inquiry, the approach must also be able to be applied to the records of all adoptions.[1916] While integrated birth certificates do not go as far towards solving these issues as some contributors would hope, the Committee is of the view that they progress the matter as far as is possible given the more complex legal environment in which birth certificates operate.

12.167 Integrated birth certificates have now been implemented in New South Wales and Victoria. They were already available in South Australia at the time of the Senate inquiry.

12.168 Despite the clear recommendation in 2012, at the time of this inquiry integrated birth certificates had not been implemented in Western Australia. In response to an invitation to provide a submission to this inquiry, the Department of Justice stated:

> The Department of Justice and the Department of Communities are currently working jointly on a set of reform initiatives including the introduction of an Integrated Birth Certificate…[1917]

12.169 The Department of Communities did not comment on integrated birth certificates within their first submission. However, during the hearing on 18 September 2023 they stated within their opening statement:

[1912] Submission 15; Submission 67; Submission 70; Submission 71; Submission 102.

[1913] Submission 101.

[1914] Submission 128.

[1915] Submission 11.

[1916] As noted within Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, p 252.

[1917] Submission 145.

> As a priority, Communities is progressing work on the potential introduction of integrated birth certificates…[1918]

12.170 Later in the hearing, they stated:

> In relation to integrated birth certificates, we currently are exploring the introduction of integrated birth certificates in Western Australia in partnership with the Department of Justice. If it is introduced, it is intended that an adoptee could use their integrated birth certificate for official purposes if desired. That is being contemplated.[1919]

12.171 These comments led the Committee to understand that work was already underway to implement integrated birth certificates. This was consistent with responses to questions in Parliament in 2022 and 2023, each of which indicated work had commenced.[1920] However, when the Committee wrote to the Department of Communities to request an update on the status of this, the Department responded as follows:

> Department of Communities has been working collaboratively with the Registry of Births, Deaths and Marriages (Registry) towards a draft proposal to support the introduction of integrated birth certificates (IBCs) in Western Australia (WA).
>
> This work has been informed by WA's policy and legislative contexts, thematic analysis of relevant issues raised in submissions to the Parliamentary Inquiry into past forced adoptive policies and practices (the Inquiry) and interjurisdictional analyses of key features of IBCs.
>
> The introduction of IBCs will be considered by Government once the Inquiry is concluded.[1921]

12.172 The lack of any tangible progress on this issue, which from the above correspondence has yet to even reach the stage of a draft proposal, was of concern to the Committee. It was particularly concerning given:

- 12 years have passed since the Senate report recommended integrated birth certificates. That recommendation was clear and unambiguous
- the prior submissions from both the Department of Justice and the Department of Communities would lead an ordinary reader to believe integrated birth certificates were already 'on the way'.

RECOMMENDATION 11

The WA Government urgently implement integrated birth certificates, to be issued to eligible people upon request, and that they be legal proof of identity of equal status to other birth certificates.

12.173 An example of the integrated birth certificate considered by the Senate inquiry is provided overleaf.

[1918] M Rowe, Director General, Department of Communities, transcript of evidence, 18 September 2023.

[1919] M Rowe, Director General, Department of Communities, transcript of evidence, 18 September 2023.

[1920] Legislative Council, *Debates*, 2022, p 1056-1057; Legislative Council, 2023, p 1156.

[1921] Department of Communities, email, 7 June 2024.

Figure 19. *Example of an integrated birth certificate*

Birth Certificate

(Sample 1, Integrated)

BIRTHS RECORDED IN THE STATE OF **EASTERN AUSTRALIA**

BIRTHS, DEATHS AND MARRIAGES ACT 2012

REGISTRATION NUMBER: 12345/ 1968

1 CHILD:

Family Name:	**Deely-Smith**
Given Name(s):	**Emily Teresa**
Sex:	**Female**
Date of Birth:	**29th February 1968**
Place of Birth:	**Royal Women's Hospital, Crown Street, Sydbourne.**

2. BIRTH PARENTS:

2A: BIRTH MOTHER:

Maiden Family Name:	**Deely**
Given Names:	**Mary Teresa**
Occupation:	**Not Stated**
Age:	**17 years**
Place of Birth:	**Windsor, E.A.**

2B: BIRTH FATHER:

Family Name:	**Smith**
Given Name(s):	**Joseph Edward**
Occupation:	**Shop Assistant**
Age:	**19 years**
Place of Birth:	**Fairfield, E.A.**

3. ADOPTIVE PARENTS:

3A: ADOPTIVE MOTHER:

Maiden Family Name:	**Collins**
Given Name(s):	**Elizabeth Emily**
Occupation:	**Not Stated**
Age:	**30 years**
Place of Birth:	**Epping, E.A.**

3B: ADOPTIVE FATHER:

Family Name:	**Johnson**
Given Name(s):	**William Alfred**
Occupation:	**Pharmacist**
Age:	**35**
Place of Birth:	**Canterbury, E.A.**

4. INFORMANT(S):

1) **M.T. Deely, mother (birth), 55 High Street, Windsor, 1st March 1968**

2) **E.E. Johnson, Adoptive mother, 123 Station Street, Burwood, June 1968.**

5. REGISTERING AUTHORITY:

I. M. GOODE, Registrar General, Sydbourne, June 1968

6. EDORSEMENTS:

1. The birth name of the registered person was recorded as Teresa Deely. Registrar, June 1968.
2. The full (adoptive) name of the registered person was subsequently recorded as Emily Johnson, Registrar, October 2012.
3. Evidence has been furnished that the biological (birth) father is Joseph Edward Smith, his details were recorded by the Registrar October 2012.

I, Ida Margaret Goode, Registrar General hereby certify that this is a true copy of particulars recorded in a register kept by me.
Registrar General of Eastern Australia, Sydbourne

[Source: M Mandryk, *Adopted Persons' Access to and use of their Original Birth Certificates An Analysis of Australian Policy and Legislation*, 2011]

Details of fathers

12.174 As set out in Chapter 3, from 1949 to 1970, a father's consent to adoption could be dispensed with by the Court.[1922] From 1970 onwards, the consent of the father was not required at all.[1923] From 1963 onwards, the *Registration of Births, Deaths and Marriages Act 1961* provided that the father of an illegitimate child would not be on the register as the father unless the mother provided the particulars, and the father provided a statutory declaration declaring that he was the father.

12.175 These developments led to fathers often not being formally identified as fathers, and (from 1963 onwards) to fathers not being listed on birth records, even when their paternity was known by mothers and/or undisputed by them.

12.176 Many contributors provided copies of letters received from the Department from late last century to present, which included text almost identical to this one from Post-Adoption Services in Department of Communities in July of 2023:

> The name of your birth father is not recorded on your original birth certificate however this was usual if the parents of a child were not married to each other at the time of their child's birth[1924]

12.177 Evidence relating to each decade from the 1950s to 1980s contained instances of fathers being left off original birth certificates when:

- KEMH staff advised mothers not to include the father's details on birth registration forms, the mothers insisted, but the staff unbeknownst to the mother recorded only a question mark[1925]
- Department files had recorded fathers' details at interviews with them present, and they were filled in on the signed 'Particulars to be furnished by Parent consenting to Order of Adoption' form used by the Department[1926]
- Department staff had recorded father's details (name, marital status, address, occupation, whether they had contributed towards the maintenance of the child) on the affidavit accompanying consent[1927]
- Ngala staff knew the father was known to the mother but instructed them to omit it when filling in birth registration papers (see paragraph 4.92)
- Hillcrest staff recorded father's name and details recorded on 'personal record' papers maintained by maintained by them, which included boxes ticked for 'acknowledge paternity' and 'knowledge of adoption'[1928]
- mothers provided fathers details on the Birth Information Paper submitted on their behalf by the public hospital, the Department, Hillcrest or Ngala[1929]

1922 *Adoption of Children Act 1896* s 5(7).

1923 *Adoption of Children Act 1896* s 4A.

1924 Submission 58a. See also: Private individual 15, tabled paper 1.

1925 Submission 81 [1957].

1926 Private individual 26, letter of correction [1973]; Private individual 7, tabled paper 1 [1981].

1927 Private individual 22, tabled paper 1g [1965].

1928 Private individual 15, answers on notice. [1970]

1929 For example: Submission 109; Private individual 15, transcript of evidence.

- fathers were named in the adoption papers[1930]
- fathers' details were requested for consent to adoption, which they signed.[1931]

12.178 One mother described meeting with the Registrar of Births, Deaths and Marriages seeking an explanation:

> The original form was ordered up from the Archives. After some short time, this was delivered up to us in his office. I was astounded to see my childish writing. There it was, the information I had given on the form, crossed out, and words to say that I had been informed! This was such a gut-wrenching discovery and such a falsehood! The registrar was taken aback also. I cannot remember anything after that. I left the building feeling numb and in pain of the stolen truth. Taken from my husband and our son, a theft of authenticity, for both.[1932] [1968, Osborne Park Hospital]

12.179 Fathers also echoed mothers' devastation at discovering that they were omitted without their or the mother's knowledge:

> The fact that my name is not recorded on our son's birth certificate. My name was sort after when having to sign the adoption order and, I know that my name was presented on the application of birth, yet it was deleted by a stranger, who had no legal right to remove it![1933] [1968]

12.180 The practice of fathers being left off birth records has also been considered in Chapter 5 in connection with consent.

12.181 Failure to record the details of fathers has led to many adopted people facing unnecessary challenges when trying to find their parents:

> How was it that it was not recorded? We were always banking on our son being able to find us by the record of the family name! How was our son ever going to find his family? Especially if my maiden name was all he had to use for a search!?! We were mortified. This was so painful and my husband was distraught.[1934]

12.182 Many contributors, including adopted people, mothers, and the fathers themselves, have sought that the missing details of a father be added to official documents. Adding a father to a birth certificate requires a formal amendment to the birth record and certificate of the adopted person.[1935] This ordinarily requires an application to the Registry of Births, Deaths, and Marriages, together with a DNA test confirming parentage.

12.183 One of the immediate barriers in this process is cost. The DNA test cannot be from just any service offering DNA testing. It must be conducted by an agency with NATA accreditation. On review by the Committee, these tests were commonly advertised as costing $550 or more.

12.184 The Department does not currently assist parties to a historic adoption with DNA testing.[1936] Financial assistance was not consistently provided by other support agencies. Where the

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1930 Submission 1c [1975]; Private individual 22, tabled paper 1 [1965]; Private individual 14, tabled paper 1 [1973].

1931 Submission 81 [1957]; Submission 88 [1968].

1932 Submission 109.

1933 Submission 88.

1934 Submission 109.

1935 Department of Communities, transcript of evidence, 18 September 2023.

1936 Department of Communities, transcript of evidence, 18 September 2023.

Registry of Births, Deaths, and Marriages requires a DNA test for proof of paternity, the cost of that test should not be borne by a person affected by forced adoption.

12.185 Those affected by forced adoption also encounter difficulty where the father will not cooperate by undergoing a DNA test, is not within Australia, or has passed away.

12.186 One contributor noted that her father had passed away, and so the Registry of Births Deaths and Marriages had required her to undergo a DNA test with a half sibling.[1937] As this contributor stated, the requirement failed to consider 'the unachievable logistics' for an adopted person to do so:

> Adoptees are often estranged or ignored by their found family…[1938]

12.187 Some contributors were able to add the father's name to a birth record on the basis that he had signed documents relating to the adoption as the father of the child.[1939] However, another contributor provided legal documents naming their father, a letter from their father confirming he was their father, and contact details for family members overseas who could also confirm his identity, and had their application refused.[1940]

12.188 One contributor noted that her father lived overseas, and was unable to sign an affidavit as he was blind and lived in a small town where there was no Australian consulate.[1941]

12.189 Processes to add details of fathers to birth certificates should also not rely upon the father being listed on documents relating to adoption. While this can be helpful evidence relating to the parentage issue, it cannot be assumed that fathers were recorded on these documents. As Chapter 6 considered, fathers were often omitted from records relating to adoption even where their identity was known.

12.190 The Senate inquiry considered the issue of adding the details of fathers to birth certificates.[1942] The Senate report noted:

> Adding new information to old certificates should … be approached with caution, but the committee believes there are cases where it is warranted. Subject to appropriate controls being in place to verify paternity, the committee supports the names of fathers being added to pre-adoption birth certificates. The process of adding a father's name should be rigorous, but not unduly costly or time consuming.[1943]

12.191 The report then recommended:

> All jurisdictions adopt a process for allowing the names of fathers to be added to original birth certificates of children who were subsequently adopted and for whom fathers' identities were not originally recorded; and

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1937 Submission 110.

1938 Submission 110.

1939 Submission 81.

1940 Submission 29.

1941 Submission 67.

1942 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, Chapter 12.

1943 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, p 257.

> Provided that any prescribed conditions are met, the process be administrative and not require an order of a court.[1944]

12.192 The Committee sought confirmation of what BDM requires for a known father to be added to the original birth certificate of an adopted person. The Department of Justice stated:

> If a birth parent is not alive, and another party applies to add parentage information to the original birth registration, the Registrar would require evidence of parentage. This may include original adoption orders or court documentation that acknowledges the birth father, DNA evidence obtained in accordance with the Family Law Regulations 1984, a court order directing the Registrar to amend the registration to include the birth father, or in very limited circumstances, the Registrar may consider statutory declarations from multiple family members to the purported father, verifying that while alive the deceased clearly accepted parentage of that child. In these circumstances the Registrar would attempt to verify this information through other means before amending an historic registration.[1945]

12.193 This response was of some assistance but does not set out the circumstances in which the Registrar is willing to consider statutory declarations. The process described is also dependent upon the father accepting parentage and conveying this to multiple relatives, the adopted person having a relationship with members of the father's family such that they will provide statutory declarations, and the family members themselves being capable of providing statutory declarations. It is unclear what a person can do if these conditions are not met.

12.194 The information about correcting or amending a certificate that is readily available on the Registry's website does not provide any specific information concerning adoption.[1946] The information about adding fathers is clearly addressed towards mothers rather than adult children, and refers to 'joint applications', which appear to be intended for mothers and fathers to apply together. This information is not helpful to those affected by forced adoption who may be seeking to add a father to a birth certificate.

12.195 From the evidence, the current processes to add a father's details to a birth certificate are not responsive to the needs of those affected by forced adoption. The Committee appreciates the seriousness of changing details on birth certificates, but where this relates to the addition of a father's details for an adopted person, the current processes lack flexibility and understanding of the specific issues facing those affected by forced adoption.

12.196 From the information available it is unclear to the Committee whether legislative reform in this area will be required, or whether improvements in policy and procedures will be sufficient. In any event there needs to be immediate improvement.

12.197 Currently, the fee for amendment/correction to a certificate is listed as $55.[1947] The details of fathers were not listed on birth certificates even when known because of the law and policy of the Western Australian government. The fee to correct this should be waived.

1944 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, p 257.

1945 Department of Justice, letter, 1 July 2024.

1946 Registry of Births, Deaths and Marriages: Correct or amend a birth, death or marriage certificate, wa.gov.au, 2023, accessed on 12 June 2024.

1947 Registry of Births, Deaths and Marriages: Correct or amend a birth, death or marriage certificate.

RECOMMENDATION 12

The Attorney General liaise with the Registry of Births Deaths and Marriages to implement a specific process for the names of fathers to be added to the birth certificates of children who were subsequently adopted and for whom fathers' identities were not originally recorded.

This process should be responsive to the needs of people affected by forced adoption, including in the following ways:

- not assume fathers will be alive, located within Australia, literate, or without other impediments to providing sworn evidence in writing
- not assume applicants will have support from or any relationship with the father, or other family members
- not assume fathers will be listed on other documents relating to the adoption of the child
- any application fees be waived
- the cost for any DNA test required not be borne by the applicant.

Other certificates

12.198 In addition to birth certificates, and adding fathers to birth records, some contributors sought improvements to current practices relating to death certificates. In cases where an adoption has occurred, the adopted person is not usually listed on the parent's death certificate, and the parent is not usually listed on the adopted person's death certificate.

12.199 This represents the position at law at that point in time. The legal effect of an adoption order is that the relationship between the adoptee and their parents is no longer treated as being that of parent and child, and the relationship between the adopted person and the adoptive parents is treated as that of child and parent.[1948]

12.200 The death certificate is therefore a legally accurate document, but does not reflect the background of a person where an adoption has occurred. A question without notice in the Legislative Council in 2022 related to this issue. Hon Nick Goiran referred to a matter in which an adoptee had applied to have their birth name and birthdate recorded with other biological children on the death certificate of their biological parent, on the basis of section 75(1) of the Adoption Act.[1949] It does not appear that any avenue is available to adopted children seeking to have their details listed on the death certificate of their parents.

12.201 The Committee considers that the most sensible resolution to this issue would be to introduce integrated death certificates, similar to integrated birth certificates, for both adopted people and parents of adopted people. This would ensure that there is greater truth-telling of the stories of those affected by adoption, including forced adoption, within those documents.

RECOMMENDATION 13

The WA Government implement integrated death certificates, to be issued to eligible people upon request, and that they have equal legal status to other death certificates.

[1948] *Adoption Act 1994* s 74; *Adoption of Children Act 1896* s 7.

[1949] Question Without Notice No. 191 asked in the Legislative Council on 17 March 2022 by Hon Nick Goiran, Parliament 41 Session 1. Section 75(1) of the *Adoption Act 1994* provides that when an adoption order is made the relationship between the adoptee and the adoptee's birth parents is to be treated as not being that of child and parent.

12.202 As noted by some contributors, death certificates can also impact upon the ability to access information and records. Where a person seeks records relating to a deceased relative, they are usually required to produce the Death Certificate. That certificate confirms the other person has passed, and also their relationship to the person seeking the records. If the death certificate does not list them, they may encounter challenges when trying to obtain the records.

12.203 Access to records does not arise only from the details on the death certificate. As stated above, the legal outcome of an adoption order is that the parents are no longer the legal parents, and the adoptive parents become the legal parents. In many instances, obtaining information or records relating to a deceased person requires a direct legal relationship with them, such as brother and sister, or parent and child. In cases where this is required, the issue is not just caused by the death certificate and the details it contains. It is created by the broader legal position created by the adoption itself, and the way that this interacts with laws about access to records.

12.204 The most practical way to approach this issue is by addressing the framework for access to records and information as a whole, as considered above in this chapter.

CHAPTER 13
Search, contact and reunion

13.1 Chapter 9 examines a few of the difficulties encountered by family members separated by adoption when seeking to find and meet. This chapter looks further at lived experiences of searching and family reunification. It considers the way technological advances have altered established methods of search and contact, and whether current systems and services meet existing needs.

Searching for family

13.2 Because forced adoptions were closed adoptions, parents and adopted people did not know who one another were, and the law often limited the ways they were able to find out.

13.3 Parents wanted to find their children, and meet their children's children. Adopted people wanted to find their parents and siblings, and wider family. Important genetically relevant medical information is another cogent reason parties seek one another.

13.4 There is an urgency to searching, because people want the opportunity to find and connect with their family while they are still alive or in good health, or so their own children have a chance to establish a relationship, or to urgently share or obtain important medical information.

Vetoes

13.5 Under the historic adoption legislation, certain people could register contact and information vetos if they did not wish to be identified or contacted by other parties. Mothers who registered vetoes may have kept their child a secret, had a negative contact experience or chose not to revisit that difficult period in their lives. Adoptive parents registered vetoes if they did not want their adopted child discovering the adoption, or out of fear of the parents. Adopted people also had negative contact experiences, but often registered vetoes out of loyalty and a wish not to upset their adopters. The operation of vetoes is discussed in full in Chapter 15 from paragraph 15.105 onwards.

Who assists with searching?

13.6 ARCS, RAWA FASS and Tuart Place all assist people seeking their family. The Department of Communities records wishes for contact between parties to closed adoptions and offers contact opportunities when there is a match.[1950] Jigsaw also devised its own version of a contact register.

13.7 Yorgum assists Indigenous clients with search, contact and reunion, alongside support and therapeutic counselling. They provide extensive family research and family trees to clients before approaching any reunion.[1951]

13.8 Contributors also sought genealogy support through other channels, such as the State Library WA. Some hired private investigators. Others searched independently; some eventually succeeded after determination, ingenuity and persistence.[1952]

13.9 Most searches relate to children and parents, but other searches are highly relevant to people with lived experience. One witness explained that, when searching in 1990, the

[1950] Department of Communities, email, 7 June 2024.

[1951] C Augusston, Yorgum Link-Up Manager, Yorgum Healing Services, letter, 23 May 2024.

[1952] For example: Submission 108.

Department would not assist him finding his biological sister, who was also forcibly adopted in WA, despite him making 3 requests. Assistance was only provided after ARCS intervened.[1953]

Searching experiences are mixed

13.10 Contributors began their searches at different times and for different reasons. Some mothers and adopted people explained how they were always trying to find their families. Some adopted people only wanted to search once they began their own families, and others waited for their adoptive parents to die before commencing their search.

13.11 The following list summarises the breadth of search experiences relayed to the inquiry:

Negative

- the difficult emotions brought up by embarking on search
- continuous searching with hope proving fruitless and bitterly disappointing
- finding the other party but being told they did not want any contact
- finding one's parent or child but discovering they have died
- public servants trying to dissuade people from seeking relevant official documents
- finding search organisations unhelpful
- long wait times for Department assistance with searching and outreach
- being told that information about the parties to an adoption is confidential and must not be published[1954]
- the Department reprimanding parents for contacting their child before facilitative laws changed
- incorrect people identified as fathers
- agreeing to contact when found through a search organisation but not being prepared by them for how to approach it or supported with how to deal with it
- the Department notifying other family members, rather than the mother, that the adopted person was seeking contact
- other family members initiating outreach to an adopted person without the knowledge or permission of the mother, and that contact resulting in a veto
- until a point in the 1990s, the law requiring the Department to initially contact adoptive parents when mothers sought reunion, even if the adopted person was an adult[1955]
- having to sign an undertaking not to contact the person the Department is about to reveal if a contact veto was in place
- the Department giving incorrect information about the existence of contact or information vetoes relevant to one's adoption
- adoptive parents not informing adopted people of calls and letters from intermediaries assisting mothers looking for them, or from natural siblings

[1953] Private individual 12, transcript of evidence. See also: Submission 99a.

[1954] Private individual 15, tabled paper 1.

[1955] Private individual 15, tabled paper 1.

- mothers finding adoptive parents and not pursuing further because the adoptive parents told them the adult adopted person wished no contact
- adoptive parents registering vetoes against the parents without the adopted person's knowledge or consent
- not being provided counselling to assist with the search process, or being advised of where to seek counselling and the applicable fees
- long wait times to receive records from the Department leading people to pursue DNA-assisted searching
- independent DNA database and genealogy searches being unfruitful due to lack of key information about parents
- independent DNA searches providing multiple possible fathers that must be tried one by one
- adopted people's children seeking family through DNA tests despite the adopted person's wishes to the contrary
- being found and advised one is a parent to a person whose existence was not previously known
- discovering family through DNA databases to whom one is still a stranger

Positive

- the support of other people in building courage to embark on search
- finding who one's parents or children are
- positive, kind and helpful interactions with Department staff and other organisations such as Jigsaw who provided information, support and counselling
- Department staff assisting to investigate and correct information and veto errors the Department made at an earlier time
- Department staff casually leaving files open such that seekers could read details they were not allowed access and could then search independently
- accepting Department help with searching leading to finding and further assistance with outreach
- parents who had positive interactions with adoptive parents even if no contact permitted with adopted person
- independent DNA-based searches being successful in identifying parents and leading to greater knowledge of wider family and family background.

13.12 Contributors narratives attest to the variety of outcomes affected people experienced:

> I remember going into Post Adoptions once. I did not realise how often I tried until I actually had gone through my papers. I remember going in there once and saying, "Look, I'm just trying to get some information about my daughter" and her saying straight to me, "She's not your daughter"—like that. It is terrible. Everything like that just throws you back.[1956]

> I didn't investigate my origins in the early days, as I didn't want to upset anyone. I was a secret that others kept, that I felt was not my secret to be broken. … Once my adopted parents passed, I felt that I could start investigating. Only now in my

[1956] Private individual 15, transcript of evidence.

> 50's I realise I am NO ONE'S secret to keep. I have the right to tell people that I exist.[1957]
>
> Once I started the search process it was an emotional rollercoaster that, as you can see, continues today.[1958]
>
> I contacted Jigsaw a couple of times over the years, once in my teens and once when I was 19 when I was pregnant myself. The first thing they did is a search to see if anybody was looking for me, and there never was. Which in turn, made me shut down and I would give up. I was so emotionally shut down by the thought of nobody, looking for me, so what was the point of continuing? The whole in my heart just kept getting bigger and bigger. Why was nobody looking for me? Why am I so unimportant? … It took me 46 years to find my birth mother, 46 long, broken hearted years.[1959]

13.13 In addition to searching, finding is difficult to live through, as one adopted person described:

> It is a bit like your dentist telling you that you have to have a root canal; it is a body blow. You go, "Not only am I out of pocket, but I'm going to be in a lot of pain", but you cannot shy away from it for your own mental health, your own good. That is when I learnt that my mother could not bear the shame of raising me as her child in 1959.[1960]

13.14 Mothers and adopted people also expressed differing and complex views on the place of vetoes:

> I think [vetoes] can just be burnt in a big bonfire. That is where they belong. They come from a time when adoptive parents were freaking out that they were going to lose their adopted kids to their biological mothers, so it was created in a place of immense fear and under pressure from this incredibly powerful group within the so-called triangle of adoption. A lot of these situations were not necessary. They were purposeful in preventing reunions[1961]
>
> there's a defined need for both parties to be protected if they feel unable to cope with contact or the failure of reconnection. It is everybody's right to refuse contact being made however this experience left both mother and child with tendencies to agree to anything in the hope it will gain acceptance and avoid rejection. … there is a basic human right to know the familial history medical, genealogical and social aspects of ones beginnings[1962]

The changed search and contact landscape

Technology has changed the nature of searching

13.15 When people affected by forced adoption want to know about their family, the wait for information can be long, feel excruciating, and cause distress.

13.16 Both before applying and while waiting for their Departmental records, parties are now able to utilise DNA testing, online genealogical databases and social media in an effort to find other parties and family information as soon as possible. For example, while at one point it

[1957] Submission 13.

[1958] Private individual 13, transcript of evidence.

[1959] Submission 119.

[1960] Private individual 6, transcript of evidence.

[1961] Private individual 1, transcript of evidence.

[1962] Submission 98.

was taking up to 9 months to receive Departmental records, a commercial service such as Ancestry DNA provides a report in around 2 months.[1963]

13.17 The cost of DNA services is relatively low, and (when operating) Jigsaw would cover that if necessary.[1964] Jigsaw explained that avenues such as direct-to-consumer DNA tests are effective, especially in finding unknown fathers:

> We use Ancestry to search as well, mostly for fathers. If someone puts in an application and the father's name is John Smith, we just all say, "Okay!" Ancestry is the only way we are going to be able to work out potentially which John Smith it is.[1965]

13.18 Social media and online forums have made it possible to trace and contact even those in other countries in a way not previously possible. Evidence revealed parties finding one another through Facebook search and reconnect groups.[1966]

13.19 Social media also plays a role in information sharing amongst adopted people and search assistance. For example, adoptees can access free DNA-based search, genealogical help and reunion advice through a Facebook group named Adoption Search Australia.[1967] Jigsaw explained that these advances were a large part of why the service was closing:

> Really, it is because our core work has been search and intermediary work. … With the advent of AncestryDNA, which goes back to around 2015 when it first came to Australia, it has gathered a lot of steam in recent years. With Facebook, there is search. Even though it is illegal to publish your name, there are adopted people where it will say on a search site that is public, "I am adopted and I am looking for Mary Smith", or whatever. We are finding in the last few years that a lot of people are doing their own search and intermediary work … a lot of people Google the information. There is less need.[1968]

DNA testing does not replace the need for original records

13.20 At a hearing, the former manager of Jigsaw stated:

> I think you should always get your records, regardless of whether you do Ancestry or not and that the records give you context, which Ancestry will not. It is not one or the other. you never know what is on there. You also never know if, for example, a mother or sibling or father has left a note on file, and you are not going to get that information unless you apply for it. Some people are shocked that, in fact, their birth mother might have contacted the department, or indeed us, 15 years ago. It would be tragic to not know that by just going down the Ancestry route on its own.[1969]

13.21 Jigsaw also explained that it can be beneficial to first obtain all available information from other sources before pursuing a DNA-based search. When there are many possibilities brought up through DNA searching, reaching out indiscriminately can create complex situations when people do not turn out to be the right people, or when family members did

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1963 Submission 84 from Adoption Jigsaw, 16 Jun 2023, p 4.

1964 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

1965 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence.

1966 For example: Submission 119.

1967 See: Private individual 4, transcript of evidence.

1968 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence

1969 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence

not previously know about the adoption. Professionals can assist in using other records to narrow down who to contact.[1970]

External services are still required to assist with search

13.22 Despite the technological avenues now available, some parties are unable or unwilling to search by themselves. Irrespective of independent searches, services can assist in the following ways:

- applying for Departmental records, form filling, witnessing and lodgement
- support going through records
- support with family research, tracing, and putting together a family tree
- support with the emotions brought up by searching
- assistance with DNA testing and genealogical database use
- mindful and ethical approaches to search and contact
- paternity testing.

13.23 Jigsaw encouraged the use of ordinary paternity tests because 'It makes a difference for everybody to see it in writing'. They also helped people with the more rigorous paternity tests acceptable in a court, which have a chain of custody and can only be conducted by certain service providers.[1971]

13.24 An adopted person similarly submitted:

> I can imagine that in some circumstances there may be questions from adoptees and birth families regarding biological evidence. I suggest an option for genetic testing to be available[1972]

13.25 For Aboriginal clients, Yorgum uses family research to facilitate reuinification, which may include working together with Link-Up services in other states and territories. They also provide graveside reunions if a close family member has died before being found.

Better information access is needed to improve search

13.26 The cost of applying for official records inhibits searching. Jigsaw submitted:

> Searches can require the following certificates - an original and/or amended birth certificate(s), marriage searches noting that a mother may have married more than once and in any state in Australia, female adoptees may have changed their surname through marriage, a mother's birth certificate to get information about her parents (the adoptee's grandparents), death certificates for any party to the adoption and again in any state. Individuals, or us on their behalf, often need to apply for multiple certificates across various states, resulting in substantial costs amounting to hundreds of dollars.[1973]

13.27 The previous chapter discusses official records and the recommendation to waive fees for people affected by forced adoption. This should extend to any relevant certificate where cost

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[1970] Submission 84.

[1971] I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

[1972] Submission 97.

[1973] Submission 84.

is an obstacle. Restrictions on accessing some official documents is also an obstacle, Jigsaw explained:

> for example, we/they cannot apply for a marriage certificate for a sibling's marriage. This limitation can make it nearly impossible for adoptees to locate their female siblings raised by the biological mother. Similarly, individuals cannot apply for a marriage certificate for their mother's sister (the adoptee's aunt).[1974]

13.28 In South Australia, 'a nominated agency worker can view Birth, Death and Marriages (BDM) records on a nondisclosure basis', and Jigsaw said this model should be considered for WA.[1975] The Committee agrees. Access to relevant records should be facilitated to improve the process for those affected by past forced adoption.

13.29 Difficulties are compounded when all relevant certificates cannot be found in WA. Cooperation is required between the between Births, Deaths and Marriages agencies across Australia, as the Senate inquiry recommended.[1976]

FINDING 68

The cost of applying for birth, death and marriage certificates and restrictions on who can access them inhibits people affected by forced adoption when searching for their family.

13.30 The electoral roll is a valuable resource for finding people,. However, its use is limited when looking for those with common names. Jigsaw submitted:

> For instance, in Western Australian alone, there are approximately 42 men with the name John, Jon or Jonathan Roberts. As Western Australia has approximately 10 % of the nation's population, it is likely, there will be over 400 men with that name. In addition, some people are known by their second name … thus making it virtually impossible to locate the right person on the Electoral roll. Currently, we have no method of filtering results on the Electoral Roll, leaving searchers with an overwhelming number of potential matches. Writing to hundreds of individuals is financially and resource prohibitive. Giving agencies access to dates of birth or at least a year of birth, is necessary for targeted and effective searches. Many previous attempts to address this issue through submissions have been unsuccessful. The Department of Communities do have access to dates of birth on a non-disclosure basis, thus unable to assist us. The current search process is inefficient, can unnecessarily distress individuals.[1977]

FINDING 69

Access to electoral roll information for dates or years of birth would assist those affected by past forced adoption in their search for family and identity.

RECOMMENDATION 14

The Minister for Community Services direct the Department of Communities to consult with relevant adoption search, contact and genealogy service providers to devise and action steps for improving access to records necessary to identify key family.

1974 Submission 84.

1975 Submission 84.

1976 Submission 84.

1977 Submission 84.

13.31 Some adopted people do not know they are adopted. They are denied the opportunity to search for their family. This scenario is discussed in Chapter 15.

Licensing of contact and mediation services is no longer needed

13.32 The Adoption Act provides for licensing of individuals providing 'contact and mediation' services. For contact and mediation, parties had a choice between:

- using the Department
- making direct contact themselves
- engaging the services of a contact and mediation agency.

13.33 Under the Adoption Act, it is an offence for a person who does not hold a licence to act on behalf of another person:

- for the purpose of contacting a party to an adoption in relation to the adoption, or
- in negotiations as to contact between any parties to an adoption.

13.34 There are also other offences which relate to contact and mediation services and licensing. An offence relating to vetoes is considered further in paragraphs 15.138 to 15.142. Licenses are provided to individuals, not organisations.[1978] When Jigsaw closed, ARCS was the only organisation with staff so licenced in WA. With the recent passing of the manager of ARCS, it is unclear how many – if any – staff there are now licenced.

13.35 It is important to note that those with mediation licences were not (necessarily) mediators in the wider sense. For example, Relationships Australia WA employs accredited family mediators, but they are neither employed within the FASS service it runs nor licenced for contact and mediation under the Act.

13.36 The 2018 statutory review of the Adoption Act noted:

> … the range of avenues that people can access to locate people, such as Facebook, Google searches and ancestry.com. The perception is that legislation has not kept pace with modern society and technology and that these provisions are regularly being breached.[1979]

13.37 The reference group for that review explored whether the provisions were 'unnecessarily restrictive of a person's right to information under the Act.'[1980]

13.38 The review ultimately found that contact and mediation licences were unnecessary and recommended repealing all provisions in the Adoption Act relating to contact and mediation licences.[1981] Amendments are yet to occur. The provisions for licensing and offences remain in the Adoption Act.

13.39 Jigsaw opined that the system was effective at preventing harms in earlier times; for example: people taking impulsive action when contacting unknown family and causing avoidable distress. However, because available technologies mean people will inevitably proceed on

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1978 See: Department for Community Development, *Information about Adoption: Past adoption register and outreach service*, 2006 (provided by Private individual 13, answers to questions on notice).

1979 Department of Communities, *Statutory Review of the Adoption Act 1994*, November 2018, p 41.

1980 Department of Communities, *Statutory Review of the Adoption Act 1994*, p 41.

1981 Department of Communities, *Statutory Review of the Adoption Act 1994*, p 42.

their own, the Jigsaw manager was of the view that licenced services are no longer needed.[1982]

13.40 The Committee agrees that licensing of contact and mediation under the Act is now unnecessary. The Act should be amended accordingly to repeal those provisions, as previously recommended.

RECOMMENDATION 15

The WA Government introduce an amendment bill repealing provisions relating to contact and mediation licenses in the *Adoption Act 1994* (WA).

Contact support services are still essential

13.41 The end of licencing for contact and mediation services under the Adoption Act does not mean there is no need for experienced intermediaries to establish contact between parties to an adoption. Despite technologies enabling individuals to contact other parties directly, ARCS cautioned that intermediary services are even more valuable in the current context:

> it can result in pretty bad results, like people contacting a mother on Facebook, or a sister. It is not the best way to contact people. We would never do anything like that. We come in when everything is falling apart, which makes it very difficult.[1983]

13.42 The language in the evidence relating to this space can be confusing. At different times and in different places, services applied between finding and meeting the other party to an adoption are called different things: contact, outreach, intermediary, mediation or counselling. In this context, some people received counselling from a non-therapeutic professional, such as a Departmental social worker. Others received therapeutic counselling alongside outreach, sometimes with the same practitioner, qualified and experienced in both. Therefore, while 'counselling' in the context of contact seemed to always include practical discussion, reflection and strategic advice, it did not always include substantive therapeutic work.

13.43 Mediation is generally a misleading term in the context of search and contact, as noted above, and merely means intermediary/outreach and support. A person born to unmarried parents and adopted in 1970 also highlighted this terminology as problematic when he sought out his family in 2006/7:

> Mediation services were offered at the time of contacting my birth parents and I felt that I did not need these services as 'mediation' indicates there is a dispute. Looking back now, I didn't understand how difficult it would be in navigating the communication and family complexities.[1984]

13.44 However, one adopted person testified that he worked with a 'brilliant' mediator when he located his mother, who helped his mother come around to the idea of meeting him.[1985]

13.45 In the later 20th century, 'counselling' through the Department was required prior to parties meeting. In this context, counselling meant support and advice prior to personal contact and reunion.

1982 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023.

1983 J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

1984 Submission 97.

1985 Private individual 12, transcript of evidence.

13.46 An adopted person born in 1965 found his mother in 1993, and found the support offered valuable:

> the counselling was beneficial for both of us because it gave both of us a warning and talked to us about—because it is something that I had not conceived and, apparently, is quite common—how a lot of these reunions do not go very well for various reasons. You have got two adults coming together that have got quite a number of years' gap. My mother, [name], could have married and had other children. Quite often, that family might not even know that she had adopted out. There are all these things that I did not even contemplate when I went and put my name down to see if I could find out. That was good with the counselling service. They did bring up all those possibilities just to, I guess, give you some heads-up. It was good to go through that process. I cannot remember how many times I went; it might have been two or three, but it was compulsory for us both to go.[1986]

13.47 This adopted person and his mother went on to have a functioning relationship up until her death 30 years later.

13.48 Although born around the same time as the adopted person in the above example, another witness did not find his mother until 17 years later. At this point in time, the Department gave searching parties an overwhelming volume of information, some of which was unclear. However, searching parties were not required to attend any kind of support sessions before contacting the other party. The following box details the input this adopted person had, his unsupported approach and its unsuccessful outcome.

[1986] Private individual 8, transcript of evidence.

Case study: unsupported contact

When one adopted person contacted the Department in 2006, he was sent the following:

- Information About Past Adoption Services (Department for Community Development)
- Information about Adoption – Obtaining adoption information (Department for Community Development), including a list of external counselling and support services
- Information about Adoption – Past adoption register and outreach services information (Department for Community Development), stating that the Department
    - operates a Past Adoption Register where parties and their close relatives can record their desire for contact with the other party
    - contacts parties if there is a match on the register to confirm their wishes
    - can help with negotiating contact arrangements
    - can provide mediation and counselling in some circumstances
    - operates a Message Box service so parties can retain privacy while corresponding
    - provides a limited search and contact outreach service in certain cases using a social worker in the Department
    - will not otherwise provide outreach, in which case parties can search and contact relatives independently or through a Contact and Mediation agency or an organisation that provides Search, Contact and Mediation services, and that only a Contact and Mediation Licensee can make contact on the party's behalf but also that organisations providing a Contact and Mediation service can request information or contact on the party's behalf
- Application for Past Adoption Services (Department for Community Development)

A letter confirming receipt of his application enclosed:

- A guide to search, mediation and contact in adoption (Family and Children's Services, Government of Western Australia, 63 pages)
- Tips for making initial contact with a birth relative (Family and Children's Services, Government of Western Australia)
- List of Contact and Mediation Licensees (Department for Community Development)

After receiving his records, he was sent:

- First letters: what do I say? (the benevolent society post adoption resource centre)

The adopted person then wrote a letter to his mother, which was delivered via the Department. A few months later he received a letter back, also via the Department, along with his mother's contact details. The Department social worker's letter was signed off with good wishes for his re-union.

The adopted person wrote back a second time to his mother, but never heard from her again.

Reflecting on this experience, the adopted person told the Committee:

> The team at Past Adoptions Services were great assistance and successfully put me in contact with my birth parents. This was such a positive outcome and at the time I remember feeling an emotional weight being lifted. In hindsight, I believe there could be some improvements …

> Searching for your birth parents is a life-changing event. We have lots of those in life, but this is probably one that as an adoptee, you only get to do once in meeting your birth parents …
>
> I did not think it was going to be that difficult and I did not think it would open up a Pandora's box. …
>
> At the time of me conducting the search, the department did—I would say subtly—suggest some counselling and other support. There might have been one line in a letter or they might have sent me some brochures, but it was not a strong recommendation, which, I think, had there been, I may have gone on a different path. …
>
> I went into it thinking that it would work out. It was not until you find out that they have not told their families and, by then, it is probably too late to bring a third party in; it is probably just a little bit too late because there is a lot of unpacking they have to do and they have to agree to that as well.
>
> I really hope that the people in the future who are doing a search like myself for their birth parents with more support and assistance in that process will have a better outcome than what I have had. When I think about my birth mother's and birth father's circumstances around not sharing with their family members, I can only imagine what that does to a family after 35, 40 years—that must open up a deep well of issues and emotions. So to leave that to someone like myself and someone like them to try to navigate alone, I think is a significant burden and it is probably not going to have a successful outcome. …
>
> I think there has to be changes made so that those parties have the right wraparound services to deal with all that, especially, I have mentioned a third party initially to help with that connection, who would not only be able to understand some of those issues, but also advise on the best way to navigate that path. Each path would be different, I am sure, but an experienced person would be able to say that in this circumstance, I think we need to take it slower or quicker, use these resources, these resources and bring the right people in, and especially conversations with the children of that family; it could be siblings, it could even be grandparents—you throw a stone into the pond and the ripple effect can get quite broad. To leave that to just the adoptee and the birth parent to deal with, it opens itself up. I was naive at the time thinking that if both parties were receptive to meet, it would work out, but in hindsight, that is not necessarily the case.

When he appeared as a witness, this adopted person had never sought out therapy or peer support about any of his experiences.

[Source: Submission 97; Private individual 13, transcript of evidence and answers to questions on notice]

13.49 The Committee is concerned at the lack of clear information and direction provided to the person in the above case study in 2006/7. A witness heard in 2024 said he was currently engaged in a search and contact process with the Department and had little idea what to expect. He explained that he has gone months at a time without hearing from them, despite concerning circumstances surrounding his adoption recently coming to light.[1987] Adoptee Rights Australia submitted:

[1987] Private individual 30, transcript of evidence.

> Funding should also be available to assist with search and family connection services, and criteria to receive it should be transparent, and not dependent on service provider discretion.[1988]

13.50 The Committee concurs. It is vital that those searching are given clear information. This enhances their decision making and provides the best possible chance for a successful outcome.

RECOMMENDATION 16

The Minister for Community Services direct the Department of Communities to review their internal practice on search and contact to ensure that people affected by past forced adoption receive clear and simple information, orally as well as in writing, about all relevant matters, including:

- what supports exist and why using them may be beneficial
- what support services are provided by the relevant authority
- the roles of public servants who provide which support services and the qualifications relevant to those roles
- who is eligible and ineligible for support services provided by the relevant authority and on what bases
- what support services are provided externally
- how to access those external services
- whether those external services are free or charge fees.

13.51 The Jigsaw manager explained the advantages of having external support during search and contact:

> There is a general process. Occasionally, people will come to see me, for example, last week I saw someone who was thinking about whether to search, so we had a discussion about that. If they have made that decision to search and we have [successfully] done that search, they will come and see me to talk about their wishes for me to have an understanding of their life and what they wish to share and not wish to share and to discuss what their perceptions are because some people have an unrealistic hope of what they are going to find and other people have prepared themselves for rejection. So we will talk. Sometimes I will say to someone, "Look, it feels like it would be useful for you to come in a couple of times", so we will do that. Then I will write a letter, if at all possible.
>
> …
>
> I will invite that [other] person to have a discussion with me, in person if they are Perth, by phone if they are not, and then it depends on the wishes of both parties. If there is common ground, it is straightforward. There are times when you enter someone's life in a time that is not suitable. So I can think of, for example, a mother I contacted. Her husband was terminally ill. … She agreed that I could contact her again in six months, and it took about 18 months, when he had passed away and she felt ready to have a discussion. So one of the advantages of using an

[1988] Submission 128.

> intermediary is that *you can be there for however long it takes and while people think it through*.[1989]

13.52 Contributors said free, better and trauma-informed support with facilitating contact and reunification was needed, by qualified professionals operating under a code-of-conduct and with a transparent complaints procedure.[1990]

> People still need mediation even in the advent of DNA and Facebook, where people sometimes find their own families. I am definitely an advocate for using a mediator. It is much more respectful.[1991]

13.53 In addition to service providers having the training and experience to practically support parties and approach other parties with care, it is clear that therapeutic counselling can be useful throughout the search and contact process. ARCS testified:

> We believe in people having some counselling before they consider reunions so they can understand their own feelings, their own experience, their expectations and, importantly, to understand how the other might be feeling—the others' experience, the mother, the father, siblings. So we would do that. We do outreach mediation, and we would do counselling for the person we outreach to so they have a chance because they have lots of feelings, when you think of them.[1992]

13.54 Assistance with making initial contact, practical support with reunion and therapeutic counselling must be available to people affected by forced adoption in the search and contact phase. With Jigsaw's closure, only ARCS and Yorgum offer these to those affected in combination. It is unclear whether the records and genealogical services of FASS and Tuart Place (for eligible clients) extend to assistance with making contact or support with reunions.

13.55 These services should be made known, be accessible, professional and transparent, but not mandatory. As one mother reflected:

> I did it [reunion] alone. ... [Support] might be useful for some people. It might not be for others.[1993]

Connecting with family

13.56 Many contributors who succeeded in finding and contacting the other party described corresponding through letters, which sometimes resulted in meeting. While for some people initial letters were exchanged through intermediaries, others did not trust anyone to explain what had happened and corresponded themselves.

13.57 Some parties that wanted to establish a relationship were unsuccessful. Many were successful but the contact did not last, or was ended for self-preservation. Some contributors had positive ongoing relationships with the other party, with a few spanning 3 decades or more. Others in evidence who never met their family have not given up hope of connecting one day.

13.58 Lived experience evidence clearly shows that connecting with unknown family is a difficult experience, even when it goes reasonably well. ARCS explained:

1989 I Andrews, Manager and Counsellor, Adoption Jigsaw WA, transcript of evidence, Legislative Council, 18 September 2023 (emphasis added).

1990 See: J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023.

1991 Private individual 1, transcript of evidence.

1992 J Newbould, Manager and Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

1993 Private individual 26, transcript of evidence.

> The past comes into the present when those affected try to establish a relationship. Many mothers cannot bear to reconnect with a child because they cannot face the pain of the loss and experience of relinquishment. The adopted person then experiences a "second" rejection. Reunion poses many challenges and can be fraught with heightened emotions and unrealistic expectations.[1994]

Reunion is difficult even in the best case scenarios

13.59 People affected by forced adoption conveyed a variety of hardships they suffered when attempting to connect with family, including:

- not knowing if a person is the other party or not
- initial correspondence from adopted people to mothers being negative, angry and hateful
- unsuccessful parent-adopted person meetings
- discovering a parent is so traumatised that they are unable to discuss anything
- siblings not connecting, or one being unwilling to invest
- adopted people not being acknowledged by their grandparents
- extended family being suspicious of the adopted person
- parents realising their child was not told they were adopted
- realising that the other party has not told their partner/children/parents/wider family about their existence
- being kept hidden from extended family
- painful feelings of rejection
- establishing relationships that did not last, or that lasted and are fraught
- shock for parents that the infant they lost is now an adult, difficulty for adopted people of having parents who missed their formative years
- anger from adopted people at having been adopted, sudden grief and guilt for parents trying to explain how it came to be
- adopted people feeling they had to keep their new relationship with their found parent secret
- adopted people finding their parents and then experiencing feelings of betrayal, guilt and shame in relation to not telling their adoptive parents so as not to hurt them
- connecting not providing answers the party was seeking
- discovering one has little in common with the other party
- parents and adopted people discovering they have conflicting understandings of their cultural background
- connecting with the other party but being unable to meet because they live overseas

> The burdens of time and trauma impede reunions so many will never be reunited, and those who do meet will not experience the fairy tale reunion that is portrayed by the popular media.
>
> - Jennifer McRae, submission 110

[1994] Submission 113.

- discovering that the other party had an unhappy life and/or is mentally unwell
- sudden shame, grief and guilt for parents at feeling responsible for adopted persons experiences of abuse in their adoptive family, depression and suicidal ideation
- regret at having been found by the other party
- fathers not accepting paternity or not wanting to meet or know their child
- adoptive parents or partners interfering in the new relationship between adopted person and parent/s
- adopted parents not responding to contact from parents expressing gratitude and goodwill
- parents being treated differently from adoptive parents at family events
- reunion resulting in estrangement from adoptive parents
- relationship lacking level of intimacy sought after by one party, including with siblings
- raising their own children while trying to establish a relationship with the other party.

13.60 One mother expressed the confronting nature of reunion as follows:

> The irony is that when the child who is adopted grows up and meets their original mother, they say "Why did you give me up?" You feel guilty at both ends. You feel guilty when the baby is born, you feel guilty if you want to keep your baby and then when they meet you, you feel guilty because you gave them away.[1995]

13.61 Adopted people also conveyed painful experiences:

> Sometime after my one and only counselling session at East Perth I was phoned by the employee I'd seen, to tell me she had found and spoken with my mother! I was thrilled at the news, but this initial contact was not the enthusiastic welcome I had imagined throughout my childhood. Her message was not, 'I have thought of you every day. How wonderful, when can we meet? Today?'. Instead, she had asked the Department of Communities employee, 'What does she want from me?'. I was so stunned by my mothers response, it still stings all these decades later. [1996]

> reunions are fractured. They are hard, because you do not fit in. You do not fit in with your adopted family. You do not fit in with your biological family. You just do not. The biological family, you are away from them for too long to make those connections where you are part of their life and you have all those memories and relationships and things that have happened through life. You cannot get it back and you are dispensable. Your adopted family, right from the start, you know that you are not them. I am a totally different person to the people I grew up with. … you are just lost in the wash of it all.[1997]

> I thought in finding my mother and family that would be the end of it I would settle into their life and me into theirs. This doesn't happen. There are many connections that are made like physical appearance characteristics and interests that are similar over time, but the separation continually creates a divide. … I was a novelty for a while, but I didn't fit in I am acknowledged but abandoned again. … I

[1995] Private individual 20, transcript of evidence.

[1996] Submission 110.

[1997] Private individual 4, transcript of evidence.

> am expendable to the families I am connected to I belong to no one except to the children whom I gave birth to they are my only true family.[1998]
>
> [When we met, my mother] said to me 'please don't take this the wrong way but I'll never let anyone hurt me like you did when they took you away' And I got it. It wasn't my fault and it wasn't her fault[1999]
>
> Once the novelty of the reunion wore off and life became 'normal' again, it was challenging to maintain contact. I had no shared history with my mother and other family. We didn't know each other apart from the basics. Reunion isn't easy.[2000]
>
> Months pass without us speaking. I've grown tired of trying, so I have stopped. I have created my own set of boundaries that protect me as a way I can self-care and manage our relationship. It took me years to realise that no amount of trying was going to bridge the ravine between us.[2001]

13.62 Contributors also emphasised positive aspects and experiences of meeting their close family, including:

- both parties being willing to connect with each other
- both parties going through counselling to prepare for meeting
- being supported by family and/or professionals through the reunion stages
- parents learning what their children look like; adopted people discovering family who look like them
- parties sharing photos of themselves during the time missed
- parents being able to explain what happened to their children
- adopted people learning they were wanted and how their parents tried to keep them or get them back
- adopted people finding understanding, compassion and forgiveness for parents
- establishing positive ongoing relationships
- discovering similarities shared with the other party
- mothers discovering that the adoptive parents were a good family for adopted people
- parents and adoptive parents establishing good relationships
- being embraced by extended family
- sharing important health information.

13.63 Contributors shared joyful moments with the inquiry:

> At 10 years I wanted to contact and write to the solicitor. He sent me a photo, as he knew the mother and watched my child grow up. … [Later] I decided to find my son through Jigsaw. He was quickly found. He was 29 years and engaged. He invited me to his wedding and I accepted. I met him and his lovely fiancée, 2

[1998] Submission 58.

[1999] Submission 149.

[2000] Submission 46.

[2001] Submission 110.

> weeks before their marriage. Today, my son has no contact with his adoptive family. He always wanted to be with his own family.[2002]
>
> I was contacted by the adoptions department informing me my daughter wanted contact. I was ecstatic and welcomed contact. My other children did not know about the adoption, and they had to be told. Luckily, they were supportive. Weeks later I received a photo of my now adult daughter. I still weep when I think about that day, it was amazing. It was 22 years since her birth and for the first time I saw her in a photo.[2003]
>
> A photo dropped out before I read the letter and I picked it up and looked and thought who is sending me a photo of me? I looked closer and realised it wasn't me. OMG its my mother this is the first time I had seen anyone that looked like me. I can't describe adequately the importance of this moment.[2004]

13.64 An Aboriginal adopted person reflected on her experience of once again being surrounded by the language that she had heard from the womb:

> Spending time with my mother's extended family and within their small community I feel on the one hand, accepted and very much at home because my physical appearance allows me to fit in but on the other hand I am very much on the outside because we do not share a language. Stepping onto the ferry from the mainland to my mother's island home, English drops away as the crew and most fellow passengers use their native tongue. The dislocation I have always felt within my adoptive family and adopted country also drops away as I feel like I have arrived home, it is so comforting, like donning a warm blanket.[2005]

13.65 Evidence commonly contained accounts of reunion as being mixed, confusing, strange or conflicting. Many recalled how meeting the other party revived difficult memories and emotions. Even those who established ongoing relationships felt that something was missing and could never be put back. For example, mothers stated:

> It was excruciatingly painful to see photos of our son and his son! How much had we and they lost! I cannot say it was wonderful. I didn't feel that way. The photos were so precious and yet, at the same time, Proof of the distance that we would find in his life and ours.[2006]
>
> The next 2 years were full of extreme emotions So Glad I'd found her, so Sad I had lost her for 22 years, So Mad at this system of secret adoption.[2007]
>
> I have met him. I describe it as I stand on the outside looking in. You do not know your place, and that is through no fault of his or mine. He has mostly the same feelings as me[2008]
>
> there is definitely a need for some sort of understanding on both sides of that huge gulf that exists.[2009]

2002 Submission 151.

2003 Submission 73.

2004 Submission 58.

2005 Submission 79.

2006 Submission 109.

2007 Submission 33.

2008 Private individual 7, transcript of evidence.

2009 Private individual 14, transcript of evidence.

> The reunion is fraught. I have a good relationship with my daughter … there is just— not whole for her or for me. There are bits missing. There are bits that hurt. There are all sorts of bits—I will just call it bitty. We work hard to make it work. It is difficult.[2010]

> she is still a bit alien. There is still not the same firm bond. I do not know; we all try, but we all fail a little bit. I do not really know how else to put that, but it just does not feel the same.[2011]

> The damage will never be healed. We have an opportunity to have relationships and aim at some level of understanding that Adoption was and still is a savage attack on the truth of family connection and who we are. … even though we are damaged, each of us has to manage, the difficulty in dealing with our conjoined present and the void of our history.[2012]

13.66 An adopted person's evidence also reflected these feelings:

> Whilst our relationship started off respectfully and curiously, there was always something missing. I'm still not sure what it is. I think she is still so traumatized by my birth and losing me, that she has herself gone into robot mode to block all her feelings, as the past is just too painful for her to endure. … Far too much time has now gone by, and I do not believe, that what I've been searching for my whole life, is within reach.[2013]

Counselling support for reunion should be available

13.67 Some mothers submitted they had no support when they first met with their now-grown children lost as infants.[2014] One submitter provided a letter that his mother wrote to the Post Adoption Research Centre in 1995, which conveys the degree to which parties can feel lost once they are found by the other party to an adoption:

> Since I have been 'found' I've acquired a reasonable library of books related to adoption issues – plus subscribing to you and Jigsaw. I've been desperately trying to work my way through the overwhelming emotional chaos I find myself in constantly since my son found me. I read, I read, but the pain and lack of right action remain. … I'm a very independent person and pride myself on being able to work things out myself. But with this issue, I am at a dead end.[2015]

13.68 Contributors described the need for ongoing counselling irrespective of reunion outcomes, as in the following examples:

> I would concur with suggestions of continued counselling with ARMS therapist for the pain of reunions or lack thereof.[2016]

> I really think that if I had have had counselling support, and also if she had counselling support, we would not have lost those years. So I think have some counselling.[2017]

2010 Private individual 26, transcript of evidence.

2011 Private individual 9, transcript of evidence.

2012 Submission 109.

2013 Submission 119.

2014 For example: Private individual 21, transcript of evidence.

2015 Submission 112.

2016 Submission 83.

2017 Private individual 22, transcript of evidence.

> The process of meeting birth parents and their families opens up a range of human emotions. Follow up counselling and support for a period of time during and afterward would assist adoptees and birth families navigate this path.[2018]

13.69 Full siblings of an adopted person also identified the need for adoption and trauma-informed family therapy to address the situations brought up by family reunion.[2019]

13.70 Yorgum uses family research to facilitate reuinification, which may include working together with Link-Up services in other states and territories. They also provide graveside reunions if a close family member has died before being found.

13.71 Therapeutic counselling support is considered in Chapter 11.

13.72 Some people with lived experience discovered the other party was overseas, and called for a travel fund. This is similar to the Family Restoration Fund the independently operated Child Migrants Trust operates.[2020]

[2018] Submission 97.

[2019] Submission 90; Submission 105.

[2020] For example: Submission 63.

CHAPTER 14
Adequacy of support services

14.1 This chapter considers whether, overall, the needs laid out in this report are being met by the available services and how that might be achieved.

A patchwork of funded services apply

14.2 The below table summarises the services currently available through funding to existing agencies to people impacted by forced adoption in WA.

Table 6. *Services currently provided to people impacted by forced adoption in WA*

	Therapeutic counselling	Peer support	Records assistance /family research	Search / contact and/or reunion	General support/ case work	Aged care navigation	Funding	Free
Post-Adoption Services	×	×	✓	✓	×	×	WA government	✓
ARCS (forced adoption)	✓	×	✓	✓	×	×	WA government	✓
FASS (forced adoption)	×	✓	✓	✓	✓	✓	federal government	✓
Tuart Place (care leavers)	✓	✓	✓	✓	✓	✓	WA government / federal government	✓
Yorgum (Indigenous clients)	✓	✓	✓	✓	✓	×	federal government / various	✓
KSGAC (Indigenous clients)	✓	×	✓	✓	?	×	various	✓

14.3 In relation to the potential for a WA redress scheme for people who experienced forced adoption, it is relevant to note that Yorgum, KSGAC, Tuart Place and FASS also have experience in supporting redress applicants through their funding to provide assistance to those accessing the National Redress Scheme.

There is an approximate match between services and support needs

14.4 At a glance, the supports that forced adoption clients require do exist in WA, in different combinations across multiple providers.

14.5 It is appropriate that only information and contact services are provided directly through the WA Government. Chapter 12 detailed recommendations concerning the centralisation of access to records and official documents, and support surrounding this process.

14.6 While Tuart Place presently only supports individuals in relation to forced adoption if they are also care leavers, its model covers all the supports that people who lived through forced adoption need.

14.7 While FASS also nominally covers all relevant supports, it is hamstrung in meeting demand by the current level of its federal funding allocation. While the RAWA team has the expertise to provide ongoing therapeutic counselling, it cannot presently do so.

14.8 ARCS is centred on therapeutic approaches, and can theoretically now provide an expanded freely accessible service.

14.9 Link-Up services by Yorgum and KSGAC centre on counselling and support for First Nations around family research and reunification. The inquiry did not receive evidence from clients of these services, so is limited in its ability to comment below.

There is a mismatch between needs and the level of services funded

14.10 While relevant supports exist, they do not currently meet the needs of people impacted by forced adoption in the following ways:

- there are insufficient practitioners to provide the services (ARCS)
- there is not funding for sufficient practitioners to provide the services (FASS)
- the services are inaccessible to some parts of the forced adoption cohort (Tuart Place)
- the service is not specialised for forced adoption clients (Tuart Place)
- the service is inaccessible in a suitable form to many regional residents (ARCS, FASS, Tuart Place)
- the services do not include all relevant supports (ARCS, Yorgum, KSGAC, although this may be appropriate for focused services)

and, crucially,

- where there are practitioners, they may not be sufficiently specialised.

14.11 As explored in Chapter 11, there are clearly not enough practitioners with the specialised training, skills and experience to address the complex needs of many people affected by forced adoption. Even if funding to existing services increased, suitable staff may not be there to be hired. At best, there will be a lag while services train up new staff in tailored approaches.

14.12 This situation applies to those in private practice also, addressed further below.

14.13 Further, there is potential for staff already specialised in providing mental health care to forced adoption clients to deepen their therapeutic practice through exploring approaches relevant to sections of this population, such as those used by STARTTS. However, the STARTTS model is based on building a closeknit team of professionals in different areas, so cannot be realised by practitioners in isolation and would require investment and careful planning to manifest in WA.

14.14 An adopted person summed up an oft-reported experience:

> I think the mediation that is offered currently is very superficial, and it is only for a few sessions and it is just to get you going, then they handball you off out into the world and you have to cope on your own. So, yes, that needs to change. That needs to be much more wraparound and supportive and ongoing, and for a lifetime if you need it. [2021]

[2021] Private individual 1, transcript of evidence.

Some contributors want a wraparound service

14.15 It is apparent that those impacted by forced adoption may have difficulty navigating their way to all the help they need, because right now there are a number of relevant services supplying some or most relevant supports to some degree. Those that do have sometimes found they were still unable to receive appropriate treatment from the support they sought, especially therapeutic counselling.

14.16 It is therefore unsurprising that mothers, fathers and adopted people requested a dedicated 'wraparound' service centred on the needs of those impacted by forced adoption.[2022] Adopted people envisioned what this could be:

> We have talked as a group of a standalone service … a building where people can go, create a community, meet others like themselves … you have an outreach service to the regional areas, and it is like a standalone, wraparound system. It is just one place that is safe and the onus is not on you to do all the work, because at the moment it almost kind of is.[2023]

> Whatever it is, it has to be a central place where everything is a one-stop shop. Having to go to different services does not work. You need to have people who are caring, understanding, but trauma informed. It cannot be just, "Oh, I care." It has to be people who know what they are talking about. You would have to have, for example, getting together with other adoptees, which I had never done before. … It has to be safe. Home visits are a good way of developing rapport—you know, having a cup of tea, a cup of coffee. I would imagine it would have to be initiated by people who have been in that position, who have perhaps developed a great understanding and healing and can walk someone through it to start with and then move them on to psychologists or services that they can access. Even though you have a trauma-informed councillor, I would not feel safe talking to someone cold, straight off the bat, do you know what I mean? Straight after this, I will be talking to other adoptees, and that will be my safe place. … There would have to be some sort of group that could do the first stepping stone, maybe.[2024]

14.17 Some adopted peple said they wanted a place like Tuart Place.[2025] As discussed in Chapter 10, some people impacted by forced adoption are eligible for services at Tuart Place, and some of those people may not realise that this is the case. Ironically considering it was intended to be a wraparound service, RAWA said that its FASS clients continue to request services similar to those for care leavers at Tuart Place, or for Forgotten Australians at Wattle Place, or similar to the Find and Connect service RAWA also offer out of Belmont.[2026]

14.18 A witness said ideally an entirely new service would be established; however, they also recognised that this poses serious challenges:

> The services are really problematic, unfortunately. FASS are completely underfunded, and for us as adopted people we would like to see everything just start from scratch, just begin again, because none of it works. … You do need a really highly trained kind of group of specialised psychologists and support staff. It is pretty enormous actually to know where to start with that. [2027]

2022 For example: Submission 88; J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023.

2023 Private individual 1, transcript of evidence.

2024 Private individual 4, transcript of evidence.

2025 Submission 67; Submission 110; Private individual 17, transcript of evidence.

2026 Relationships Australia WA (Forced Adoption Support Service), letter, 24 May 2024, p 1.

2027 Private individual 1, transcript of evidence.

14.19 The Committee concurs. Given there are insufficient numbers of specialised staff within existing support organisations, creating a brand-new service would be complex. Further, as identified in Chapter 11, it is important people have some choice as to what services they engage for support.

14.20 If a new wraparound service was funded, however, the STARTTS model could provide a helpful template.

The potential for several adequate services is there

14.21 To really deliver the support forced adoption people and their families need, investment is required to convert and upgrade the existing services. For example, in relation to FASS, a mother submitted:

> It is a shame that federal funds do not cover therapeutic counselling with Relationships Australia and that their trauma counsellors, are not available to those affected by forced adoption. This would build on the excellent service and governance provided by FASS WA, if the WA Sate Government could fulfill this need, with funding.[2028]

14.22 The review of ARCS's funding to provide free counselling due at the end of 2025 will be helpful in ensuring that the service is operating as intended for that purpose, and what more is needed if it is not.

14.23 In correspondence and at a hearing, Dr Phillipa White, director of Tuart Place, made it clear that it could function as a specialised support service for all people impacted by forced adoption with additional funding. It has the space, already offers the kinds of services required, and has staff specialised in work with similar clients, some of whom are forced adoption clients as well as care leavers.[2029] The crossover in the experiences and needs of many care leavers and people who experienced forced adoption means this investment makes sense.

> Because there is such a large overlap in the needs that people come to us with—like trauma-informed counselling, the search for social connection and the search for records—I think the service lends itself to add on a service for forced adoptees who would also be eligible to access the other range of services available at Tuart Place. It is more so that it is a one-stop shop or hub model where people can come to us and ask for any kind of help and we will support them to access that.[2030]

14.24 Dr White said that in order to accommodate all forced adoption clients Tuart Place would need the input of additional specialised clinical staff and more staff trained in records and reunification. She added:

> We would want to consult with people who are survivors of forced adoption and see what they wanted and also have their input into co-designing any service that continued on… That is essential, I believe.

14.25 However, Dr White also acknowledged that it would be helpful to have forced adoption-centred services provided from multiple locations to assist the ageing cohort of clients.

2028 Private submission. RAWA FASS submitted that they 'remain open to funding and service expansion conversations' (Submission 51a).

2029 Dr P White, Director, Tuart Place, letter, 1 May 2024.; Dr P White, Director, Tuart Place, transcript of evidence, Legislative Council, 12 June 2024.

2030 Dr P White, Director, Tuart Place, transcript of evidence.

Building a specialised workforce requires investment

14.26 Chapter 11 found that it is vital that people have choice when it comes to accessing support. For this reason, there need to be more therapeutic practitioners able to meet the needs of forced adoption clients, as well as support workers, informed GPs, researchers and genealogists. Again, a better evidence base will improve the quality of care provided by health professionals.

14.27 In the Committee's view, forced-adoption centred, trauma-based training and development for psychologists and counsellors is vital. There needs to be an increase in the number of suitably qualified people who can be accessed through funded services, or through funding to individuals to access private services – as a funding of redress or otherwise.

Consultation is important to improve supports

14.28 In addition to the information gathered by this inquiry, and consultation with existing providers, the input of lived experience stakeholders into the design and implementation of services for them will assist in their healing and ensure that supports better meet their needs.[2031]

RECOMMENDATION 17

The WA Government consult with lived experience stakeholders and identified support service providers to develop and implement a plan for services to meet the needs of people impacted by forced adoption in WA in relation to:

- mental health support
- access to adoption records and information
- search, contact, genealogy and mediation services.

14.29 As this report evidences, there are considerable issues and concerns caused by the Department of Communities' role in supporting those affected by forced adoption. The Department played a central role in past forced adoption. Its involvement in provision of support services, including access to records, and search, contact, genealogy and mediation services, is not appropriate.

14.30 The Committee considers those services would be better provided by a standalone unit within the Department of Justice, with a degree of independence. This was also discussed in relation to records in Chapter 12. That unit may also be well suited to handle the redress scheme recommended by this report.

RECOMMENDATION 18

The WA Government make arrangements to ensure that the services of:

- access to adoption records and information, and
- search, contact, genealogy and mediation services

are provided by a standalone unit that is not within the Department of Communities.

[2031] See: Submission 128; Dr P White, Director, Tuart Place, transcript of evidence.

CHAPTER 15
Accountability and action

> I think that is what Parliaments are for. … they are for questions and they are for keeping people, governments and oppositions accountable. They are also for us to reflect on our history and the occurrences that have a deep and lasting impact on our citizens. If we as a Parliament and ultimately as a government can make moves to help in that healing, it should happen.
>
> - Hon David Templeman MLA, Legislative Assembly, *Debates*, 2010, p 236

Acknowledgement and awareness

15.1 The Committee recognises all those who gave their personal account for the purposes of this inquiry.

15.2 In tabling this report, the Committee has raised awareness of the dark history and ongoing legacy of forced adoption practices in WA. However, people affected by forced adoption seek acknowledgement by those in Government, and all those involved, that forced adoption was wrong, that mothers wanted their babies, and that adopted people were not abandoned. Despite the WA apology in 2010, the government did not embrace recommendations of the 2012 Senate inquiry. Only through concrete actions will those impacted feel truly acknowledged.

15.3 The suffering of people who experienced forced adoption in WA is exacerbated by the lack of community awareness of the damage done through separation and adoption practices. Mothers are still being told they gave their child up, and adopted people are still being told they were lucky to be taken in by others. Like the adoptions themselves, what happened to them was concealed, and their pain disregarded. As they struggle with the aftermath daily, lived experience contributors continue to feel 'gaslit' by the general population.[2032]

> that society believes there is no impact or consequence of the removal of a newborn from their mother has been so damaging and still is
>
> - Andrea Fewster, submission 58

15.4 In the past, government messaging painted adoption in a positive light, and WA citizens were not generally aware of the harm being done in service of adoption. One researcher submitted that, 'The process was labelled 'adoption' which … hid the nature of what it was'.[2033] While this obfuscation has a lasting effect, it also constituted a disservice to the WA community of the time who elected representatives in line with its standards.

> I can think of no cruel loss, emotional injury or damage greater than the forcible removal of a child from the safety of its mother and into the hands of complete strangers, and the purposeful breaking of the natural bond between a mother and her child. The psychological trauma and lifelong effects of this separation have been long known yet as a society we have unquestioningly come to view family separation by adoption as normal and acceptable.[2034]

[2032] See also: Submission 110; Submission 149.

[2033] Submission 95.

[2034] Submission 124a.

15.5 Contributors described their advocacy over more than 4 decades and the difficulty of getting any traction in relation to the profile of forced adoption as both a past practice and live issue for those that survive it today. They want to see public education that corrects the understanding of the general public, and better information and resources available online. They also need practical measures such as adoption-informed training for crisis services, and for both government and non-government client-facing employees who may service people who experienced forced adoption practices. The Committee agrees with the suggestion that tick boxes on health-related forms would increase general awareness and help to identify mothers and adopted people as a vulnerable population.[2035]

15.6 Through its response to the Victorian parliamentary inquiry into historical adoption, the Victorian Government developed a webpage on its website dedicated to the history of forced adoption.[2036] The Committee considers that this level of recognition and exposure would benefit survivors in WA, the wider population, and future generations. It observes that the Department of Communities recently put up a webpage on its section of the WA Government website dedicated to historical forced adoptions. The Committee welcomes this development. In its view, the Department can ensure that its online information is effective and useful to those affected and the wider community by consulting with those with lived experience.

RECOMMENDATION 19

The WA Government consult with lived experience stakeholders to develop and implement a strategy for raising public awareness of forced adoption, including staff training, the gathering of health-related information, online information, and the development of any other relevant resources.

Responsibility, apologies and actions

15.7 Apologies and acknowledgement were a key feature in the evidence before this inquiry. Contributors shared the impact of apologies that have been made, and their requests and hopes for the future.

Effort is required to make an apology meaningful

15.8 Research on apologies conducted by the Canadian Law Commission[2037] was considered in depth in the Australian Senate's 2004 report on forgotten Australians.[2038] Criteria established through that research was endorsed in the Senate report on past adoption policies and practices[2039] and in the Victorian report into forced adoption.[2040]

2035 Submission 125: 'A cost effective strategy to raise awareness of Adoptees and Mothers of Loss would be the addition of a Tick Box on all health-related forms. This would assist in recognition of Adoptees and Mothers of Loss as a vulnerable population. This is particularly important as we age and require more care, especially where Dementia and Alzheimer's may come into play and verbal skills diminish.'

2036 See: Victorian Government, *History and timeline of forced adoptions in Victoria*, vic.gov.au, 2024, accessed 1 July 2024.

2037 S Alter, *Apologising for Serious Wrongdoing: Social, Psychological and Legal Considerations*, Law Commission of Canada, 1999.

2038 Australian Senate, *Forgotten Australians: A report on Australians who experienced institutional or out-of-home care*, 2004.

2039 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, p 22.

2040 Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, Recommendation 1.

15.9 The Committee also endorses the 'basic elements' for meaningful apologies as set out within that research, which are:

- acknowledgement of the wrong done or naming the offence
- accepting responsibility for the wrong that was done
- the expression of sincere regret and profound remorse
- the assurance or promise that the wrong done will not recur, and
- reparation through concrete measures.[2041]

15.10 The Committee is of the view that apologies from individuals, institutions, or organisations relating to past forced adoption in WA should satisfy the above basic elements.

Apologies by organisations relevant to WA to date have been inadequate

15.11 The Parliament of WA delivered an apology on forced adoption in 2010. Julia Gillard also delivered an apology in Federal Parliament in 2013. Both apologies were generally (but not always) viewed in a positive light by contributors.[2042] However, those affected emphasised that an apology alone will not resolve past forced adoption.

> Apologies and Counselling however are not a form of Justice.[2043]

15.12 Multiple contributors also mentioned the apologies of specific institutions and organisations involved in forced adoption in WA. Ngala provided an apology on its website, which was then updated in 2023. One contributor noted that prior to the update, the apology contained the comment:

> While the Home's policy was to keep mothers and babies together as much as possible, many babies born in the Home were fostered or adopted".[2044]

15.13 This comment is completely at odds with the information available about Ngala's role in forced adoption, as set out in Chapter 8. There was no recorded policy at Ngala to keep mothers and babies together as much as possible. The practices seen in the evidence before this committee are also inconsistent with such a policy. Comments like this can be viewed as 'whitewashing'[2045] which undermine the meaningfulness of the apology.

15.14 While it is positive that Ngala's apology has been revised and replaced with an updated and improved version, it is disappointing that this occurred after 13 years and seems to have been prompted by the announcement of this inquiry.

15.15 Institutions and organisations should be proactive in their attempts to improve. This includes improving any apologies that might have been made by them previously.

15.16 Salvation Army Australia provided an apology on its website in December 2022, about which a submitter provided commentary:

> The following apology proffered by the Salvation Army is offered as an apology which does not meet the criteria required for forgiveness to be granted:

2041 S Alter, *Apologising for Serious Wrongdoing: Social, Psychological and Legal Considerations*, Law Commission of Canada, 1999.

2042 Submission 52; Submission 59.

2043 Submission 6.

2044 Submission 110.

2045 Submission 110.

> The Salvation Army Eastern Territory (NSW, QLD and ACT) would like to offer its most sincere apology to the many mothers, fathers and babies who are now adults, for the role we played in the policy of forced adoptions in the past and the continuing impact this policy **may have had on the lives of those affected.** (My emphasis).[2046]

15.17 The apology by the Salvation Army refers to the potential harm and impact of a policy, rather than acknowledging the actual harm and impact of their role in forced adoptions. Referring to a policy rather than to direct actions minimises the role played and abrogates responsibility for the harm caused. Referring to the impact that something 'may' have had is vague and avoids specific reference to the harm caused. In order to more appropriately meet the basic elements for a meaningful apology, the Salvation Army should outline its role more specifically, acknowledge that role, and accept responsibility for it by apologising for the harm and impact caused (and not the harm that *may* have been caused) to those affected.

15.18 The Catholic Church delivered an apology in New South Wales in 2011 through Catholic Health Australia's chief executive. This was followed by comments by the Perth Catholic Archbishop that he had 'little evidence' of forced adoption practices in Catholic hospitals, and that 'Church adoptions in WA were arranged privately through a lawyer and the consent of the woman had been a requirement'.[2047] The Archbishop later apologised for his 'insensitive' comments, stating he had read reports from women who gave birth at St Anne's and was 'beginning to understand something of their grief'.[2048] However, he also stated 'perhaps they (the Sisters) did not believe they had forced anyone, only strongly recommended adoption but I can see for a young girl this would seem like forcing her because it was pressure she could not resist'.[2049]

15.19 When a representative for an institution or organisation makes statements inconsistent with their apology, it can undermine the benefits of the apology. Institutions and organisations which played a role in forced adoption should ensure that all staff, but particularly those who are senior and may make public comments, have an understanding of forced adoption and the role they played, so that they do not make comments out of ignorance which are harmful and damage the work of the institution itself.

15.20 In addition to this, institutions and organisations involved in forced adoption must consider their own responsibility to understand the history of their organisation and what exactly their role entailed. There has been more than enough time for relevant institutions and organisations within WA to conduct their own research and investigations and to gain an accurate understanding of what exactly their role was. That role forms an intrinsic part of their history, even if it is confronting and much less marketable than other parts.

15.21 The North Metropolitan Health Service (NMHS) provided an apology on its website in March 2023. One contributor indicated that the phrasing of the apology had been the subject of ongoing consultation, until it was rather abruptly published on the website.[2050] It appeared from the evidence that there was a sudden desire from the NMHS to have a published apology available, and this took priority over the objections raised by some within the consultation group.[2051]

2046 Submission 50.

2047 J Hammond, 'Archbishop doubts all adoptions were forced', *The West Australian*, 26 July 2011, accessed 14 June 2024.

2048 D Emerson, 'Hickey apologises to mothers', *The West Australian*, 21 September 2011, accessed 14 June 2024.

2049 D Emerson, 'Hickey apologises to mothers', *The West Australian*.

2050 Private individual 22, transcript of evidence.

2051 Private individual 22, transcript of evidence.

15.22 It is important that when consultation occurs, it is treated seriously and not as a process to garner goodwill only to be abandoned when a competing organisational priority arises.

15.23 At the hearing in October 2023, the Chief Executive of the NMHS recognised that the apology did not fully meet the needs of those affected by forced adoption.[2052] In the Committee's view, the current apology has been prepared with an appropriate level of care and meets many of the basic elements for a meaningful apology. It is unfortunate that the circumstances of its finalisation and publication have damaged that meaningfulness and some of the benefits that it may otherwise have brought.

15.24 Contributors noted that the current apology does not go far enough to acknowledge the exact role of KEMH in forced adoption, particularly its role in arranging and facilitating adoptions.[2053]

> It is not widely known that the state's main maternity hospital King Edward Memorial Hospital was responsible for facilitating a significant number of adoptions directly from their facility. In my time negotiating a formal apology with the executive at KEMH and North metro, I requested that this fact was included in their online statement. They have refused to do so, they have also refused to include a separate sentence acknowledging the impacts experienced by adopted people. At the time of this submission, I am still waiting for the NMHS board to attend to the required adjustments so that the formal apology complies with the recommendations stated in the 2012 Senate Inquiry.[2054]

15.25 The Committee agrees with contributors that the NMHS apology could be improved with greater specificity regarding the role of KEMH, the Kensington Annexe, and Osborne Park Hospital. In that respect, the considerations and findings within Chapter 7 should provide guidance.

15.26 The Committee is of the view that all institutions and organisations should make their apologies available on their websites. In addition to this, all institutions and organisations involved in forced adoption in WA should revise the information available on their websites regarding their history, to ensure that it is accurate and consistent with their apology. The page displaying an apology should not be the only space on an organisation's website that mentions their historic involvement in adoption (including forced adoption).

Apologies are realised through actions

15.27 Many contributors expressed disappointment that apologies from various institutions and organisations had not been followed by any tangible changes or improvements.

> I do not feel enough has been done to right the wrongs of the past.[2055]

> Just giving an apology is not enough. We were promised 'concrete measures'.[2056]

> Just giving an apology without alleviating the distress and pain being apologised for devolves the apology into empty words. It is worse than giving no apology.[2057]

2052 Dr S Bowen, Chief Executive, North Metropolitan Health Service, transcript of evidence, Legislative Council, 9 October 2023.

2053 Private individual 22, transcript of evidence; Submission 110.

2054 Submission 110.

2055 Submission 33.

2056 Submission 72.

2057 Submission 72.

15.28 Lack of action was a considerable issue raised in relation to the apology by the Western Australian government. Contributors were disappointed that promises had been made but had not been kept, and that there had been no real change in the decade that followed the apology.

> It is unfortunate that as the first government to apologise for past adoption practices nothing much was done to underpin that apology. None of the promises that were made in parliament that day were carried out. Other Australian states made apologies and actually did something practical as well.[2058]
>
> I am saying to the government please do not embarrass us by giving us another verbal apology. Please take immediate and long overdue action.[2059]
>
> The State and National Apologies we received were earnest, heartfelt and well-meaning. Finally watching the national apology for the first time in 2018 was a cathartic moment for me, and I was proud of my home state of Western Australia for being the first to say sorry.
>
> But without meaningful action – and there really hasn't been any – these words are reduced to motherhood statements.
>
> …
>
> The implication is that "sorry" was enough and that we could heal on our own. [2060]
>
> The Apology was well received and for some it provided some healing from their painful past experiences. However, unfortunately, the Apology was not accompanied by any redress or services for those affected by past adoption practices.[2061]
>
> At the time of the apology the government promised to build a memorial. They did not do so. Yes there is a memorial in WA but that was built with federal funds by ARMS with the assistance of FASS.[2062]

Memorials and commemoration

15.29 Multiple contributors were supportive of one or more memorials being established to recognise and commemorate forced adoption in WA. Only one memorial currently exists, which was installed by ARMS. Contributors noted that additional memorials would be a positive development, including memorials in rural areas which would be more accessible to those affected living outside the Perth metropolitan area,[2063] and commemorative structures at all facilities involved in past forced adoption.[2064]

15.30 The NMHS is in the process of planning and installing a memorial. While it is disappointing that the process has stalled during the course of this inquiry, the Committee agrees a memorial would be appropriate and would be a positive way to acknowledge the role played and its impact on those affected. One contributor mentioned that she supported a memorial at KEMH because some land was set aside for heritage, which meant it should be able to stay forever. However, she would find it difficult to go to KEMH (but could do it) and that she did

2058 Submission 87.

2059 Private individual 9, transcript of evidence.

2060 Submission 112; Private individual 17, transcript of evidence.

2061 Submission 113.

2062 Submission 87.

2063 Submission 72.

2064 Submission 70.

not think her mother could ever go there.[2065] This highlights the importance for all institutions and organisations to engage in genuine consultation with those who have lived experience, to ensure any actions taken maximise the benefit to those affected and limit potential harm.

Responses to this inquiry

15.31 Many contributors were attentive to the ways in which both government and non-government organisations and institutions responded to this inquiry. Responses and engagement were often seen by contributors as a way to gain insight into whether these entities truly understood and accepted their roles in forced adoption.

15.32 It was common for submissions from both government and non-government institutions to claim that they were willing to assist this Committee and supported the inquiry. However, the submissions, responses, and engagement from both government and non-government institutions and organisations involved in forced adoption did not reflect this willingness. The Committee was disappointed by the standard of most responses received and the time it took to receive them.

15.33 While the specific issues relating to each agency, institution or organisation differed, they often involved:

- a lack of complete understanding of their actual role in past forced adoption
- a lack of awareness of what their records contained
- unwillingness to review information or records so that they might be in a better position to understand their role in past forced adoption, and/or to respond to the inquiry and questions from the Committee
- minimising their role in past forced adoption or the actual practices of past forced adoption
- lack of care and empathy when preparing submissions or responses to the inquiry
- evasion when information or records were sought, including:
    - failing to provide answers to clear and direct questions from the Committee
    - applying a limiting scope to queries from the Committee without consultation with the Committee
    - failing (or implicitly refusing), to provide documents to the Committee even when specifically requested to do so
- failing to prioritise queries from the Committee, and failing to meet timeframes for responses
- attempting to shift responsibility to other government agencies
- stalling existing processes pending the outcome of the inquiry.

15.34 In making its findings and recommendations, the Committee was informed not only by the information and evidence provided and available about institutions and organisations, but also their responses and engagement in the inquiry process.

[2065] Private individual 22, transcript of evidence.

Response from the Department of Communities

Focus on legislated role

15.35 Submissions and material from the Department of Communities about this inquiry persistently focused upon the 'legislated' role, responsibilities and duties of the Department during the 20th century. The terms of reference for this inquiry refer to the 'role' of the state government. This is not limited to the legislated role. As this report makes clear, the role of the Department in past forced adoption went beyond what was clearly defined by legislation.

15.36 While it can be attractive to focus on clearly defined roles, and policies which have been set out in writing, the reality of forced adoption goes well beyond this. Focusing only on written or official records means other available evidence of what occurred is omitted. A complete understanding of past forced adoption, and the role of any institution, should involve consideration of all available evidence. That evidence includes the evidence of those with lived experience.

Institutional amnesia

15.37 The initial submission from the Department of Communities contained only a single paragraph regarding their involvement in past forced adoption practices.[2066] It can be adequately summarised by the first sentence:

> At this time, Communities is not able to advise the Committee of the role (if any) the Department had in historic forced adoption practices during the years between 1939 and 1980.[2067]

15.38 As one contributor noted:

> That statement left me lost for words, because it is starkly symbolic of the collective amnesia and denial of the public and private institutions involved in WA forced adoptions who have so far given evidence. I expect it will be no different when Ngala also gives evidence this week. It is nothing less than institutional gaslighting.[2068]

15.39 The issue with this aspect of the Department's submission is not that it does not match the Committee's findings regarding its involvement in past forced adoption, as set out in Chapter 7 of this report. The issue is the suggestion that the Department's role in past forced adoption was unclear. While specific aspects of the practices may not have been known with certainty, there was more than enough information and evidence available to the Department at the time of making this submission to support (at least) an acknowledgement that it did play a role.

Failure to review and catalogue records

15.40 Another element seen repeatedly in the Department's submission was the purported inability to comment or assist in relation to certain issues due to the 'time available'[2069] and the volume of records held. This was also noted by the above contributor:

> Many have stated that lost and destroyed records make it difficult to establish facts, while simultaneously stating that the overwhelming amount of records in various locations require many staff and thousands of hours to properly examine. I

[2066] Submission 106, p 23.

[2067] Submission 106, p 23.

[2068] Private individual 17, transcript of evidence.

[2069] Submission 106, p 23.

> note that none of these institutions or the Department of Communities were independently undertaking such work when this inquiry was announced, and I am certain that the status quo of the silence and denial would have remained if not for this committee's terms of reference.[2070]

15.41 As established in Chapter 7, the Department was the primary government agency responsible for adoptions throughout the 20th century. Following the commencement of the Adoption Act in 1994, it was entrusted to hold the records of adoption services. It is simply unacceptable that 30 years after being entrusted with that responsibility, no effort has been made to catalogue the considerable records held by them.

15.42 In addition to this inaction, it was deeply concerning to the Committee that the volume of uncatalogued records was repeatedly referred to by the Department as a basis for being unable to answer questions in this inquiry.

Client file audit

15.43 In response to queries at a hearing, the Department conducted an 'audit' of files related to adoptions during the inquiry period. During that audit, the Department made various decisions as to the scope of the audit itself. Those decisions, undertaken without consultation with the Committee, were also in favour of the Department. They were likely to result in a neutral or positive outcome from the audit regarding the Department's practice in adoptions in the 20th century.

Responses to queries

15.44 As with many submissions, in their correspondence to the inquiry the Department regularly stated it was willing to assist with any particular queries.

15.45 On 29 April 2024, the Committee sent a list of questions, seeking their response by no later than 24 May 2024. On 13 May 2024, the Department requested an extension to 7 June 2024 to provide a response. In response, the Committee requested that as many answers as possible be provided by close of business 24 May 2024, and additional answers following this date. The Department did not provide any responses by close of business 24 May 2024. Many responses were provided on 7 June 2024 at 4:05pm, and the remaining 4 responses were provided on 12 June 2024. Many responses were brief and it was unclear why those responses were not provided sooner, as requested.[2071]

15.46 Some answers were inconsistent with the information provided earlier in the inquiry. One example is the inconsistency regarding progress on an Integrated Birth Certificate, considered in Chapter 12 from 12.156 onwards.

15.47 One question from the Committee sought a copy of any code of practice or procedural manual for the processing of applications to access documents. The Department responded to acknowledge the existence of 'internal practice guides' but refused to provide copies, instead stating:

> These internal practice guides are not publicly available.[2072]

15.48 This response is obstructive and unhelpful. The practice guide sought would have assisted the Committee to diagnose the potential causes of the many issues experienced by contributors when seeking to access their records (as considered in Chapter 12). The refusal to provide this document, and the evasive answer to a question which sought specific

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[2070] Private individual 17, transcript of evidence.

[2071] Including questions 1, 2, 4, 5, 6, 7, 8, 10, 38, and 39.

[2072] Department of Communities, email, 7 June 2024.

information about what documents are usually available and whether these will or will not be provided,[2073] result in lack of transparency regarding the processes for access to records, which is concerning.

15.49 Within their file audit, the Department made reference to information available in Court Register index books. When the Committee requested other information from the Court Register index books, the Department sought that the question be referred to the Department of Justice as 'the agency responsible for the Court index'. It is unclear why the Department could access that information for the purpose of their file audit, but not for the purpose of responding to the Committee's queries.

15.50 The Committee was left with an overall impression of a lack of proactive management of past forced adoption as a Departmental responsibility, and a lack of prioritisation and resourcing to serve the public interest and those affected by forced adoption.

Response from the Department of Health

15.51 Overall, the responses from the Department of Health indicated a reasonable understanding of past forced adoption practices and their role.

15.52 One key feature that distinguished the Department of Health from most other institutions involved in forced adoption was that their proactive activity with archival records. The KEMH records had been reviewed and catalogued. From the evidence at the hearing on 9 October 2023, this did not sound like an easy task, but the necessary resources had been invested to see it through. An additional box was also located during the inquiry and was dealt with appropriately.

15.53 The management of records enabled the Department of Health to be more responsive to the Committee's queries. It also likely benefits those affected by forced adoption who are seeking records from KEMH.

15.54 Information the Department of Health provided was usually clear and well-articulated. Where the Department was unable to provide information or records to the Committee, this often appeared to be a practical reality despite the Department's best efforts, rather than the consequence of any lack of effort, investigation or care.

15.55 One unfortunate aspect was the freezing effect of the inquiry on the Department of Health's progress in consulting and arranging a memorial at KEMH. The Committee is of the opinion that this caused unnecessary delay, and consultation and progress for the memorial ought to have continued during the inquiry.

Response from the Department of Justice

15.56 Department of Justice engagement in this inquiry was poor. They were invited to provide a submission, but when pressed only provided information relating to birth certificates. For remaining issues, the Department of Justice referred the Committee to the Department of Communities. The Department of Justice also declined to attend a hearing when requested to participate on 9 October 2023.[2074]

15.57 Like many agencies and institutions, the Department of Justice invited the Committee to make contact if further information was required. Unfortunately, when the Committee did so, it took the Department of Justice more than 2 months to provide a response. On 29 April 2024, the Committee sent a list of questions, seeking responses by no later than 24 May 2024. On 23 May 2024, the Department of Justice requested an extension to 7 June 2024.

[2073] Response to question 37, attached to Department of Communities, email, 7 June 2024.

[2074] Submission 145.

This extension was granted. However, there was no response. After repeated follow ups, the Committee was advised on 12 June 2024 that the Department of Justice had not engaged with the Department of Communities regarding the responses, and the Attorney General was unable to sign off on it prior to approval from the Minister's office. The response was then received nearly 3 weeks later, on 1 July 2024.

15.58 The Department of Justice's intention to refer the Committee to the Department of Communities for past forced adoption issues was unhelpful. While the Department of Communities may be the lead agency for such issues, the Committee expected other government agencies, particularly those with historic roles in forced adoption, to engage in and assist this inquiry. While the Department of Justice had a much less direct and significant role in forced adoption than the Department of Communities and the Department of Health, it still had a significant role. The Department of Justice's submission did not acknowledge that it had any role. There was also nothing within the Department of Justice's submission to assist the Committee about significant records held that might be of relevance to the inquiry, including records at the Courts and BDM.

15.59 The Committee is of the view that the Department of Justice has a poor understanding of past forced adoption and its role in those practices. Substantial effort is needed to educate staff and officeholders to ensure the Report's recommendations are beneficial to those affected.

Response from Ngala

15.60 The submission from Ngala at first appeared to be of a high quality. However, upon review substantial parts of that submission had been lifted from their most recently published history book. Some of the statements from that history had been placed in the submission without proper context, resulting in either misinterpretation or misrepresentation.

15.61 As with many institutions, the submission suggested a poor organisational understanding of their actual role in forced adoption. This had not substantially improved at the hearing on 26 October 2023 and left many contributors disappointed:

> It seems there has been not much in the way of record keeping, no minutes of meeting the "panel" who made the decisions, no financial records to hand, and as the new CEO has only been there a short while, she only has anecdotal evidence from staff or ex-staff as to what happened in the FAE at Ngala – whereas I WAS THERE. I can tell you the answer to questions she could not![2075]

15.62 However, the Committee notes that at that time the CEO Ms Dillon had only recently taken on that role. The Committee was left with the impression that Ms Dillon made genuine attempts to assist but had limited information available to her.

15.63 Ngala also publicly commented during the course of the inquiry, supporting a government redress scheme offering compensation to mothers and to adopted children. Media reported:

> The adopted people need to be considered. They are experiencing that trauma and I think the government needs to redress them[2076]

15.64 Ngala's attempt to press Government redress for those affected by forced adoption implies Ngala itself should not be expected to redress. It is problematic for Ngala to make such comments. Government did have a prominent role in past forced adoption, but of the three primary institutions involved, Ngala had the closest ties to government. It had the greatest

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[2075] Submission 1b.

[2076] C Moodie and C Ho, 'Forced adoption meant Marilyn had to go undercover to attend her own daughter's wedding', *ABC News*, 24 March 2024, accessed 29 June 2024.

influence over the development of law and policy, through consultations and input as the 'experts' in the area. Its leadership benefited from those close ties, and often went on to successful roles, including within the government. Ngala cannot, and should not, seek to distance itself from its own role in past forced adoption by laying the blame solely at the feet of the government.

Response from the Salvation Army

15.65 The Salvation Army submission indicated some research and enquiries were undertaken to understand their role in forced adoption. Investigations led them to locate 2 documents relating to Hillcrest. One of these was the historical record Matron kept, which assisted the Committee.

15.66 The Salvation Army was willing to assist when the Committee made further enquiries. Answers on Notice included not only collated data, but also the records containing that data.

15.67 The Commissioner of the Salvation Army remotely attended a hearing on 9 October 2023 with 2 solicitors. The fact that the majority of attendees at the hearing were lawyers was noted by contributors within later submissions, and generally left them with a negative perception. However, the Commissioner appeared reasonably well prepared, and informed enough to answer many of the Committee's questions.

15.68 As with other institutions and agencies, there was evidence that this inquiry had stalled the Salvation Army's progress with forced adoption issues. A witness noted that the Commissioner said she

> would wait on the outcome of this before the Salvation Army did anything. So what you are actually doing in here is absolutely vital, because if you get it wrong, we will be no further forward with these institutions than we ever have been. They have always knocked us back. They have never tried. They are making little efforts now because things are coming out, but unless they get some sort of direction from you people in here, they will just sit back and say, "Nothing to do with us. We didn't do it."[2077]

Response from the Sisters of Mercy

15.69 The Sisters of Mercy submission was problematic. The second paragraph read:

> ISMAPNG recognises the trauma and pain caused by historical adoption practices that were a reflection of the values and attitudes of society at the time.[2078]

15.70 The submission concludes with a similar statement regarding the 'historical structures' that led to a lack of social acceptance of unmarried mothers and the lack of support available to them during these times.

15.71 As considered in Chapter 2, previous inquiries into past forced adoption, which included the consideration of institutions the Catholic Church and the Sisters of Mercy operated, have dispelled the notion that the practices seen in forced adoption were a result of social mores of the time. Against the backdrop of the evidence and findings of those inquiries, it is unacceptable that the Sisters of Mercy have continued to attempt to use this justification.

15.72 The submission also refers more than once to the decision to adopt having already been made well before the birth of the baby and before the mother's admission to hospital. This is clearly an attempt to distance the Sisters of Mercy from the coercion that occurred for so many mothers in relation to that decision. However, this is inconsistent with other practices

[2077] Private individual 14, transcript of evidence.

[2078] Submission 62.

acknowledged in the submission, including notes for a conversation which refers to a Sister discussing 'the choice' of adoption with expectant mothers, and interviewing potential adoptive parents.

15.73 The submissions also use the term 'relinquish' a number of times in the context of adoptions. This term is not appropriate, because it implies something was voluntarily given up or left behind.

15.74 The submission also claims that the Sisters of Mercy did not seek payment or an exchange of labour from expectant mothers. This is inconsistent with the evidence about St Margaret's and Catherine McAuley, some of which was obtained from the history of the Sisters of Mercy.[2079]

15.75 The Sisters of Mercy sent one representative to appear before the Committee at a hearing on 9 October 2023. Their representative was accompanied by a lawyer. Their evidence focused on St Anne's, noting that it was a hospital, was 'never an adoption agent', was 'not engaged in arranging adoptions', and that 'doctors at St Anne's and other hospitals had a list sometimes of parents wanting to adopt, but the Sisters never had such a list'.[2080] This is inconsistent with the evidence before the inquiry and the findings in Chapter 7. The Sisters of Mercy operated multiple institutions over various periods of the 20th century, each of which were involved in forced adoption. This included but was not limited to St Anne's.

15.76 When considered together with comments the Archbishop of the Archidiocese of Perth made surrounding the Catholic Church apology, the Sisters of Mercy submission seems to reflect a complete lack of understanding, and lack of acknowledgement, about the actual practices of past forced adoption and the role they played.

15.77 The Sisters of Mercy had a direct role in past forced adoption. As set out in Chapter 7, this role went beyond merely acting as a medical or accommodation provider.

Positive responses to the inquiry

15.78 This chapter focuses on acknowledgement and action from those involved in forced adoptive practices. However, the Committee acknowledges the assistance given from some other organisations and institutions. These included the organisations currently assisting those affected by forced adoption within Western Australia.[2081] Their engagement and responses reflected genuine care for those affected, and many of their contributions are in Chapter 9 and Chapter 11.

15.79 The submission from the Australian Association of Social Workers was also well informed and clearly set out. Some aspects differed from the Committee's findings, but the submission more broadly reflected an appropriate level of understanding of the role of social workers in some forced adoptions, of what forced adoption practices involved, and the impacts.

15.80 Submissions from the Australian Psychological Society and the Royal Australian and New Zealand College of Psychiatrists were also well prepared. These reflected that both institutions are reasonably well informed regarding the impacts of past forced adoption. The Committee notes that Submission 37 may be of interest to these institutions as an example of the involvement psychiatrists had in past forced adoption.

2079 A McLay, *Women out of their Sphere: Sisters of Mercy in Western Australia from 1846*, Vanguard Press, 1992, as considered in Chapter 8.

2080 Sister Eileen Ann Daffy, Sister of Mercy, Anne Liscia, Lawyer for Sisters of Mercy, Institute of Sisters of Mercy of Australia and Papua New Guinea, transcript of evidence, Legislative Council, 9 October 2023.

2081 Including ARCS, RAWA FASS, Tuart Place, STARTTS, and Yorgum.

A redress scheme for forced adoption in Western Australia

15.81 Calls for a WA Government redress scheme were common among contributors:

> We were wrongly subjected to past government intervention and the ensuing government now has a moral duty to make amends.[2082]

15.82 As set out in this report, forced adoption in WA occurred with the involvement of state government agencies. The development of the legal framework surrounding adoption enabled the incidents that occurred. Laws were initially developed with a focus on the interests of adoptive parents, rather than the interests of the parents or the child themselves. When shortfalls in the law were identified, they were not addressed with the urgency necessary to prevent the further harm that followed. The power of the Department was not matched by an appropriate level of care towards proper procedure, staff oversight, and the people, including children, who were impacted by their actions.

> What I'm hoping comes from this inquiry is not only an apology, but recognition of the damage done to lives that cannot be undone.
>
> - Amanda McLennan, submission 38

15.83 This report has detailed the government's role in the damaging practices of separating unmarried mothers and children and the lifelong trauma that is continuing today.

15.84 There is no form of redress capable of wholly resolving the many, complex issues forced adoption caused. For many, the issue of redress is not about a fixed sum. Instead, it provides a clear acknowledgement that what happened was wrong.

> For the loss of a child, it is a token. Nothing will ever replace a child, but at least we could put a line under it.[2083]

> What I want, I can't get back
>
> - Private individual 7, transcript of evidence

15.85 The Senate inquiry recommended a national redress scheme. However, this was not implemented by the Australian Government. The Victorian inquiry recommended the introduction of a redress scheme for forced adoption, and the Victorian Government has now established the first forced adoption redress scheme in Australia. The Victorian scheme includes a financial component, counselling and psychological support, and individual apologies. Applicants are able to select one or more of these outcomes when making their application.

15.86 The Committee is of the view that a redress scheme should be established for Western Australian forced adoption. That scheme should include a financial component, counselling and psychological support, and individual apologies.

Financial component

15.87 Some contributors said a financial component of any redress scheme should be a 'non-discriminatory payment':

> Non-discriminatory compensation—just, "This is it; we did wrong." If that makes sense.[2084]

2082 Submission 124a.

2083 Private individual 26, transcript of evidence.

2084 Private individual 26, transcript of evidence.

15.88 The Victorian redress scheme is limited to mothers affected by forced adoption. Multiple contributors prefer a Western Australian redress scheme, inclusive of different parties affected by adoption, and not limited to mothers.

> I do not think it is unreasonable for mothers and fathers who lost their children as a result of flawed past adoption practices and government institutional intervention to be compensated for their loss and the lifelong injury that they have sustained as a result. As should our children who were robbed of their birthright and injured by this discriminatory practice.[2085]

> In the redress scheme, do not leave one group out, or make divisions within the groups.[2086]

15.89 The Committee is of the view that a redress scheme in WA include mothers whose children were forcibly adopted, and people who were forcibly adopted. A redress scheme should also include fathers in certain circumstances. Many fathers were excluded from being involved with their child, or even knowing their child existed.

15.90 However, some fathers chose not to be involved with their child, were involved in applying pressure to the mother to have the child adopted, or committed an offence or abuse against the mother which resulted in the child's conception. These fathers should not have their actions rewarded by financial payments through a redress scheme.

Counselling

15.91 Chapter 11 considers the current support services available to those affected by forced adoption, including counselling and psychological support. While funding for services should ensure they are able to continue to provide these services as they have been doing, a redress scheme in WA should also incorporate provision of these supports for applicants. Those affected by forced adoption should be provided with lifelong counselling and psychological support. Many have already developed a therapeutic relationship with a professional. Any support through a redress scheme should recognise this and provide for client choice and flexibility. Such choice will not limit clients' options and avoids the need to establish themselves with a new provider.

15.92 In the design of the counselling component of a redress scheme, consideration should be given to WA residents who experienced forced adoption elsewhere.

Personal apologies

15.93 The Committee also considered the role of non-government institutions and organisations in any redress scheme. While state government agencies were involved in forced adoption, they did not act alone. As set out in Chapter 8 of this report, in the overwhelming majority of experiences shared with the Committee, non-government institutions and organisations were directly involved in past forced adoption.

15.94 Many affected by forced adoption said the right apology would be meaningful. It would be beneficial for institutions and organisations to commit to cooperating with requests through a redress scheme and extend personal apologies. This would benefit both parties. An acknowledgement is a form of healing. Organisations hear people's experiences directly, which in turn informs their approach to other individuals and the issue more broadly.

2085 Private individual 26, transcript of evidence.

2086 Submission 128.

15.95 Rarely did contributors receive an individual or personalised apology. Unsolicited, the Salvation Army apologised to one mother in circumstances not of her choosing.[2087]

15.96 In a briefing with the Committee, representatives of the Department of Justice and Community Safety in Victoria indicated that some organisations in Victoria are providing individual apologies and have their own process. However, Victoria's experience has been that the independence of the redress scheme enables a consistent framework and approach for achieving restorative justice on both sides.[2088] Therefore, for WA it is important that apologies are independently facilitated by the scheme working with the relevant parties, whether government or non-government.

15.97 The specifics of a redress scheme in WA should be designed through a consultative process which includes those with lived experience of forced adoption in Western Australia.

RECOMMENDATION 20

The WA Government establish a redress scheme for those directly affected by past forced adoption in WA, comprised of:

- a monetary payment
- counselling and psychological support
- a direct personal apology from involved institutions and organisations.

The following principles guide the scheme:

- the eligibility criteria include mothers whose babies were forcibly removed, children forcibly removed from their mothers, and in some circumstances fathers of children forcibly removed
- the evidentiary threshold be 'reasonable likelihood' that the child was forcibly separated from its mother or parents
- the process streamlined and applicants given choice between the scheme's components
- fixed sum payments through the scheme that does not discriminate between the specific circumstances of different applicants or the eligibility classes
- lifelong individual and family counselling by therapist of choice
- applicants not precluded from accessing the scheme if they have made a civil claim
- the scheme be administered by a standalone unit not within the Department of Communities.

15.98 Should Recommendation 20 be agreed and implemented, the Western Australian Government should also consider the potential to seek reimbursement for redress payments from the involved institutions and organisations.

RECOMMENDATION 21

The Attorney General liaise with those institutions and organisations involved in past forced adoption, and secure their commitment to a redress scheme including:

- partial reimbursement for redress payments and/or counselling provided to recipients
- participation in an apology process.

2087 Private individual 20, transcript of evidence.

2088 Department of Justice and Community Safety, Victoria, briefing, 14 February 2024.

15.99 Contributors also raised the issue of legal advice and the ability for them to obtain independent guidance:

> A fully funded legal advice and referral service to ensure applicants receive free, independent guidance on redress and/or civil litigation.[2089]

15.100 The parents of children forcibly adopted were not provided with independent legal advice regarding that process and not usually in a position to seek out and afford legal advice. Those affected should be empowered to make informed decisions about what avenue, if any, they wish to pursue for compensation and redress. Independent legal advice assists with understanding their legal position and thus making important decisions. A funded legal advice and referral service is required to provide this assistance.

RECOMMENDATION 22

The WA Government establish and fund a legal advice and referral service for ensuring those affected by forced adoption are able to receive free, independent legal advice about their options for accessing a redress scheme.

Civil litigation & the statute of limitations

15.101 Redress is a much-needed action to recognise the impact of broad policy failure. However, the ability to seek compensation through civil means was raised by contributors including Ms Ramsdell from Slater and Gordon.[2090] Ms Ramsdell said:

> The importance being vindicated in the eyes of the law and independently by the institutions and organisations that perpetrated the wrong cannot be understated. For many mothers the driving force behind their legal proceedings is acknowledgement from those that participated in, caused, perpetrated, and allowed the wrong to occur. Compensation could never 'make it right', but it can be an acknowledgment and it can certainly assist those affected in seeking the support, counselling, psychology, and psychiatric services they need.[2091]

15.102 The initial barrier to civil remedy is the *Civil Liability Act (WA) 2002*. It only provides for awards of personal injury damages for injuries arising from incidents after 1 January 2003. This excludes all incidents during the period of focus for this inquiry.

15.103 A further barrier is the statute of limitations. As Ms Ramsdell helpfully summarised:

> Statutory limitation periods determine the time within which a claim for damages must be commenced.[2092]

15.104 Many contributors expressed a wish for the statute of limitations to be lifted in relation to past forced adoption.[2093]

15.105 In Western Australia, incidents which occurred prior to 15 November 2005 are dealt with by the *Limitation Act 1935*. This allows for a person to commence their claim for personal injuries damages within 6 years of the incident. Those affected by forced adoption within the period of focus for this inquiry would fall outside this 6-year period. While this period can be

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2089 Submission 124a.

2090 Submission 127.

2091 Submission 127.

2092 Submission 127.

2093 Submission 33; Submission 115; Submission 124a; Submission 59; Submission 63; Submission 110.

extended by a Court at its discretion, this creates uncertainty and can add to the duration and cost of litigation.[2094]

15.106 The motivations behind limitation periods were set out in the case of *Brisbane South Regional Health Authority v Taylor.*[2095] First and foremost, Hon Justice Michael McHugh considered the effect of delay on the quality of justice:

> The longer the delay in commencing proceedings, the more likely it is that the case will be decided on less evidence than was available to the parties at the time that the cause of action arose.[2096]

15.107 Several aspects of delay set out in that case are relevant when considering past forced adoption. This included the potential for 'palpable' deterioration in the quality of justice, such as a crucial witness having died or an important document having been destroyed. It also included potential for deterioration that is not recognisable, even by the parties themselves:

> So, it must often happen that important, perhaps decisive, evidence has disappeared without anybody now "knowing" that it ever existed. Similarly, it must often happen that time will diminish the significance of a known fact or circumstance because its relationship to the cause of action is no longer as apparent as it was when the cause of action arose. A verdict may appear well based on the evidence given in the proceedings, but, if the tribunal of fact had all the evidence concerning the matter, an opposite result may have ensued. The longer the delay in commencing proceedings, the more likely it is that the case will be decided on less evidence than was available to the parties at the time that the cause of action arose.[2097]

15.108 As noted by the *Inquiry into Responses to Historical Forced Adoption in Victoria*,[2098] Hon Justice Michael McHugh proceeded to set out the 4 broad public policy justifications for limitation periods (aside from the effect of delay on the quality of justice) as follows:

- as time goes by, relevant evidence is likely to be lost
- it is oppressive, even "cruel", to a defendant to allow an action to be brought long after the circumstances which gave rise to it have passed
- people should be able to arrange their affairs and utilise their resources on the basis that claims can no longer be made against them
- insurers, public institutions and businesses, particularly limited liability companies, have a significant interest in knowing that they have no liabilities beyond a definite period.[2099]

15.109 When raising statutory limitation issues, similarities are often drawn between forced adoption and child sexual abuse actions. Limitation periods were removed for child sexual abuse actions in WA in 2018, following a recommendation by the Royal Commission into Institutional Responses to Child Sexual Abuse.

2094 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, accessed 18 April 2024, p 246.

2095 *Brisbane South Regional Health Authority v Taylor* (1996) 186 CLR 541.

2096 *Brisbane South Regional Health Authority v Taylor* (1996) 186 CLR 541.

2097 *Brisbane South Regional Health Authority v Taylor* (1996) 186 CLR 541.

2098 Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, p 226.

2099 *Brisbane South Regional Health Authority v Taylor* (1996) 186 CLR 541.

15.110 Some key parallels between child sexual abuse and past forced adoption include:

- the historic nature of behaviour
- the significant psychological and emotional trauma often caused by the incident
- the young age of many at the time of the incident
- the presence of 'shame, embarrassment, blame and guilt'[2100]
- delays between connecting conditions, illness or injury with the history of what was suffered.[2101]

15.111 The Committee also agrees with Ms Ramsdell that, for mothers:

> The ability to seek legal advice at the time of the forced adoption was next to impossible.[2102]

15.112 The above circumstances and similarities to child sexual abuse mean that, much like incidents of child sexual abuse, the statutory time limits:

> …place adult survivors of abuse in an invidious position, because most will simply and quite normally be incapable of bringing their action within the time.[2103]

15.113 When considering whether statutory time limits should be altered, the public policy and quality of justice should be carefully considered.

15.114 In cases of forced adoption, there is less potential for a disadvantage to defendants due to the passage of time or a loss of evidence. While many records have been lost or destroyed since the incidents, the loss of those records appears more likely to disadvantage a plaintiff than a defendant. Evidence before the Committee indicates that those involved in forced adoption routinely omitted or misrepresented their conduct in official records. Existing records are unlikely to reflect behaviour contrary to the law, even where it occurred. Other records which could corroborate the recollection of a plaintiff are often destroyed or lost due to the passage of time. The plaintiff has not benefited from holding the records, or choosing which records to catalogue, keep, or destroy.

15.115 The Senate inquiry did not recommend the statute of limitations be removed. However, the Committee expressed the following view:

> In cases where illegality is alleged in the adoption process the prosecution of those responsible should not be hindered by statutes of limitation. The committee urges all states and territories to examine the limitations for infringements of adoption legislation to ensure that they do not act as a barrier to litigation by individuals who were not made aware of their legal rights at the time that offences may have been committed. The committee does not want people who have been damaged by their experience of forced adoption to be damaged further by having to endure

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2100 Submission 127.

2101 Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, p 228 (referring to Family and Community Development Committee, *Betrayal of Trust: inquiry into the handling of child abuse by religious and other non-government organisations*, Victoria, November 2013, p 539). See also Submission 127.

2102 Submission 127.

2103 B Mathews, 'Limitation periods and child sexual abuse cases: Law, psychology, time and justice', *Torts Law Journal*, 2003, 11(3):218-243. See also: Submission 127.

> a long and bruising legal journey that may ultimately be unsuccessful due to a legal technicality.[2104]

15.116 The Victorian inquiry noted the importance for those affected by forced adoption having multiple avenues of compensation available to them.[2105] However, it also acknowledged that claims may still be difficult to prove in court, as noted by Hon Nahum Mushin:

> There is a good argument, I suppose, to repeal the statute of limitations for actions in respect of forced adoption, and while I support it, it seems to me that it would have no real, practical use, because of what I have said—that there have already been actions which have failed. The most important one is *Arthur v. State of Queensland [2004] QSC 456 (Austlii Series)*. That is the most significant of those actions. So yes, I think there is a good argument to repeal the statute of limitations in forced adoption areas, but I think in practice it has got a very questionable practical use to it.[2106]

15.117 Removing the limitation periods and other technical barriers to these claims will not remove the other barriers faced by those wishing to pursue civil action. These include the following:

- Proceedings of this nature are often of some complexity, which is difficult to navigate without legal representation. That legal representation can be costly.
- Due to the passage of time, recollection is less reliable, evidence is hard to gather, and it may be very difficult for a plaintiff to satisfy the onus of proof.
- The adversarial nature of civil litigation adds to the already significant emotional impact of legal proceedings, including feeling that they and their experiences are on trial.

15.118 Statutory limitations generally operate for the welfare of society and suggestions to modify their operation, especially in retrospect, should be considered with great caution. However, in cases of historic forced adoption, as with cases of historic child sexual abuse, the current limitation is operating to further disadvantage those who were historically already placed in a position of great prejudice.

15.119 People affected by forced adoption faced significant disadvantages in recognising and advancing any claim for the illegal and improper conduct to which they were subjected. It is unreasonable to expect that mothers affected by forced adoption would have the resources and awareness to overcome the treatment and misinformation that they endured, to seek compensation from those responsible, within 6 years. Those who wish to pursue compensation through civil litigation, directly from the institutions responsible, should not be prevented from doing so by the current limitation period.

15.120 Contributors also raised the current availability of the 'Ellis Defence' for institutions involved in past forced adoption.

15.121 The Ellis Defence originated from a case in which Mr Ellis made a claim against the Roman Catholic Church for the Archdiocese of Sydney relating to historic sexual abuse. The Church was not incorporated. Its property was held by trustees who were incorporated, but they were not responsible for the conduct of the priests. This presented an obstacle for Mr Ellis' case, because from a legal standpoint, there was no proper defendant for him to make a claim against.

2104 Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Commonwealth of Australia, The Senate, February 2012, accessed 18 April 2024, p 247.

2105 Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, Victoria, Legislative Assembly, August 2021, p 239.

2106 Legal and Social Issues Committee, *Inquiry into responses to historical forced adoption*, p 238.

15.122 The Ellis Defence then became a common barrier for those seeking compensation from faith-based institutions where they had been victims of child sexual abuse. The Royal Commission described this as a 'loophole' and recommended legislation to provide that where an institution had an associated property trust, the institution was to nominate a 'proper defendant' with sufficient assets to meet any liability. If it failed to do so the property trust should be the proper defendant.

15.123 In response to this, WA enacted legislation which specifically provided for claims relating to child sexual abuse to be made against entities that were not incorporated at the time of the abuse, even where the specific officeholder had changed.[2107]

15.124 Multiple institutions involved in past forced adoption in WA were unincorporated at the time of the incidents. Those institutions should not be provided with the protection of the Ellis Defence.

RECOMMENDATION 23

The Attorney General introduce legislation similar to the *Civil Liability Amendment (Child Sexual Abuse Actions) Act 2018* (WA) amending the *Civil Liability Act 2002* (WA) and the *Limitation Act 2004* (WA) to remove limitations on claims relating to forced adoption.

Contact vetoes

15.125 Contact vetoes and information vetoes were introduced by the Adoption Act, which came into operation in January 1995. Under that Act:

- A person who was a party to an adoption or a relative of a party to an adoption could lodge a statement of their wishes or objection to being contacted by one or more of the parties to the adoption or any relative of a party to the adoption.[2108] This was a 'contact veto'.
- The adoptive parent, or adoptive parents, of an adoptee, could also lodge a request to prevent release of information to a birth parent that would otherwise be provided to the birth parent under the Act.[2109] This was an 'information veto'.

15.126 Where a person sought to contact another person about the adoption, or information, the register was reviewed to take into account any contact and information vetoes. If a person was seeking information or records which would identify the person holding a contact veto, the person seeking information would be made to provide an undertaking not to contact them before the information would be released.[2110]

15.127 It was an offence for the person to breach the undertaking, or to harass the person who had lodged the contact veto.[2111] It was also an offence to have another person do this on their behalf.

15.128 In 1997 the Adoption Act was reviewed. The Final Report was tabled in Parliament on 27 November 1997. The report noted:[2112]

2107 See the *Civil Liability Legislation Amendment (Child Sexual Abuse Actions) Act 2018* (WA).

2108 *Adoption Act 1994* s 96.

2109 *Adoption Act 1994* s 97.

2110 *Adoption Act 1994* s 103.

2111 *Adoption Act 1994* s 104 (section now repealed).

2112 Adoption Act Legislative Review Committee, *Review of the Adoption Act 1994*, May 2007, pp 89-90.

- Vetoes had an impact on those searching for relatives, making them feel like criminals for their desire to contact relatives despite a veto.
- Vetoes had a negative effect upon those wishing to contact their family, who already had to overcome fears of rejection before taking steps towards a rejection.
- Every person in society has the right to say "no" to contact from another person.
- Vetoes were placed at a time when no one advocated for the child's rights.
- Reports were that most searching people respected another person's wish to not have contact. Adoption Services had reported that there had not been any formal investigations or prosecutions for an alleged breach of a signed undertaking in relation to a contact veto.
- The Department could ask a person who had lodged a contact veto whether they were prepared to consider having contact, when approached by a searching person. Those in the reunification space had observed that a person's situation could change significantly over time but the contact veto might not have been changed to reflect this.
- The law surrounding contact vetoes perpetuated abnormalities that could have significant psychological effects on others.

15.129 For vetoes, the report recommended:

- The Adoption Act be amended so that it was no longer an offence for a person to contact another person who had placed a contact veto against that person.
- Existing contact vetoes be converted into 'Statements of objection to contact' and placed on a register.
- Persons who had placed an existing contact veto should be offered counselling prior to repeal of the offence provisions.
- Searching persons must attend an interview with the Department (or a counsellor approved by the Department for this purpose) where identifying information about a person who has registered a 'Statement of objection to contact' is to be released. At the interview, the person should be provided with information about an individual's right to privacy and the reasons, if know, for the other person's 'Statement of objection to contact'. If these reasons are not known, the searching person should be provided with general information about the possible ramifications of contacting a person against their wishes.

15.130 Many of the recommendations regarding vetoes were given effect through amendments in 2003.[2113] As a result of those amendments:

- New information and contact vetoes could no longer be registered.
- Existing information vetoes would be removed after 24 months.
- Existing contact vetoes would remain.

15.131 As a result of the 2003 amendments, only contact vetoes which were registered before the cut off date remain in effect. The title of contact vetoes remained unchanged, despite the recommendation they be converted to 'statements of objection to contact'.

15.132 As of 2006, 749 contact vetoes remained in place in Western Australia.[2114] Of these, 296 had been lodged by (or on behalf of) adoptees, 252 by adoptive parents, 197 by parents, and 4

[2113] *Adoption Amendment Act (No. 2) 2003* (WA).

[2114] Adoption Act Legislative Review Committee, *Review of the Adoption Act 1994*, May 2007, p 88.

by others.[2115] On 7 June 2024, the Department confirmed that 777 contact vetoes were in place as at 3 May 2024.[2116] It is unclear how this number has risen from the 2006 figure, given no new contact vetoes could be lodged from 1 June 2003 onwards. The figure also includes 3 court orders under section 83 of the Adoption Act 1994, which this Committee does not consider to be 'contact vetoes'.

15.133 Contact vetoes still serve as a clear communication that the person who has lodged the veto does not wish to be contacted. As was noted in the review of the Act, every person in society has the right to say "no" to contact from another person.[2117] Anyone failing to respect this can commit an offence if their behaviour contravenes the law.

Contact vetoes are not the same as section 83 orders by a Court

15.134 For the avoidance of doubt, this Committee does not consider a court order made under section 83 of the Adoption Act to be a 'contact veto'.

15.135 Court orders made under section 83 of the Adoption Act are considered within the broader topic of access to information and records in Chapter 12.

Decriminalisation of contact veto offences under the Adoption Act 1994

15.136 The offence of breaching an undertaking or harassing the person who had lodged a veto was removed in 2012. Although this decriminalisation occurred more than 10 years ago, many contributors appeared unaware of this. When vetoes were referred to by those affected by forced adoption, it was common for them to refer to potential criminal consequences, including the severity of the fine and the threat of imprisonment. In many cases, this appeared to be based upon the information provided to them in the past, including when they were made to provide an undertaking.

FINDING 70

Many people affected by past forced adoption are unaware of the decriminalisation of offences relating to contact vetoes. This includes people who have entered into undertakings in relation to contact vetoes.

15.137 The Department should ensure the decriminalisation of these matters is more widely understood. This is especially the case for those who provided undertakings and were provided information by the Department which is now outdated.

RECOMMENDATION 24

The Minister for Community Services direct the Department of Communities to contact individuals who entered into an undertaking about contact vetoes prior to the *Adoption Act 1994* 2012 decriminalisation amendments and provide updated information.

Contact and mediation agencies, and contact vetoes

15.138 An offence still exists in relation to contact vetoes for contact and mediation agencies. This is considered below.

[2115] Adoption Act Legislative Review Committee, *Review of the Adoption Act 1994*, May 2007, p 88.

[2116] Response to question 18, attached to Department of Communities, email, 7 June 2024.

[2117] Adoption Act Legislative Review Committee, *Review of the Adoption Act 1994*, pp 89-90.

15.139 Contact vetoes currently restrain contact and mediation agencies licensed under the Act. Before contacting a person, these agencies must first contact the Department's CEO to ascertain whether there is a contact veto in place.[2118] If so, the CEO notifies the agency.

15.140 If an agency contravenes the veto, a penalty of $10,000 and 12 months' imprisonment applies under section 108.[2119] They may also have their licence cancelled, be blocked from obtaining a licence for 10 years, and have any professional organisation that they are registered or a member with notified of the offence and conviction.

15.141 The 2018 review of the *Adoption Act 1994* recommended the repeal of provisions relating to contact and medication licenses. This would include the offence set out in section 108. Contact and mediation services under the Act are considered in further detail in Chapter 13 from paragraph 13.32 onwards.

15.142 For a section 108 offence in particular, the Committee is of the view that this ought to have been repealed in 2012 when the section 104 offences relating to contact vetoes were decriminalised. Regardless of any other legislative reform relating to contact and mediation agencies and licensing, this offence should be repealed.

RECOMMENDATION 25

The WA Government introduce an amendment bill repealing section 108 of the *Adoption Act 1994*.

Impact upon access to information and records

15.143 Contact vetoes also have an impact on access to information and records. Where a person involved in an adoption seeks these which will contain identifying information for a person who has registered a contact veto, they will not be provided with those records unless they sign an undertaking.[2120] Access to information and records has been considered in more detail in Chapter 12.

15.144 The basis for an undertaking was clear given the criminal consequences for breaching that undertaking, or for harassing the veto holder. The undertakings no longer have a clear purpose. If the intention was to use them as confirmation that a person had been made aware of a contact veto, this could easily be done with another document.

15.145 The requirement for an undertaking also adds unnecessary delay to the process of seeking and obtaining records. Officers at the Department must give consideration to the information and any contact veto in place, and then manage the process of obtaining the undertaking. This consumes resources better used for assisting those affected by forced adoption.

15.146 The Committee is of the view that undertakings are unnecessarily formulaic and intimidating. They provide no value to any party affected by or involved in past forced adoption. These undertakings should no longer be required.

[2118] *Adoption Act 1994* (WA) s 108(1).

[2119] *Adoption Act 1994* (WA) s 108(2) and (3).

[2120] *Adoption Act 1994* (WA) s 103.

RECOMMENDATION 26

The WA Government introduce an amendment bill to:

- repeal section 103 and 82(4)(c) of the Adoption Act 1994
- amend section 82(4)(b) by deleting "83(2); and" and inserting instead - "83(2)."
- amend section 100(3) to remove the reference to section 103.

Misleading titles

15.147 The term 'contact veto' is no longer accurate. The term 'Statement of objection to contact' was recommended in 2007. This term would more accurately represent the current purpose and effect of contact vetoes.

RECOMMENDATION 27

The WA Government introduce a bill amending the *Adoption Act 1994* to convert existing contact vetoes into 'Statements of objection to contact' and place on a register.

The future of contact vetoes

15.148 Contributors provided a variety of views concerning contact vetoes and how they should be dealt with in the future.

15.149 Allowing contact vetoes to remain in place perpetuates harm and fails to challenge the historic and outdated attitudes towards adoption and parenthood. Removing contact vetoes is likely to cause harm to those who hold the vetoes, by making them feel that a protection they have relied upon has been stripped.

15.150 When weighing the available options for contact vetoes, great care was taken not to favour the status quo. Continuing with the status quo rather than recommending changes can be attractive to decision makers, because it allows for less culpability for the harm that follows. However, there is no solution to the issue presented by contact vetoes that will avoid harm. Recommending no change to the current contact veto arrangements will cause harm. Recommending a significant change to those arrangements will also cause harm. The only difference is the magnitude and the group harmed.

15.151 The Committee is of the view that contact vetoes should be phased out over a period of 18 months.

RECOMMENDATION 28

The Attorney General introduce a bill repealing section 100 of the *Adoption Act 1994* and providing for contact vetoes to no longer have an effect after 12 months of the amendments coming into operation.

15.152 During the phasing out period, individuals who hold contact vetoes should be contacted and provided with information regarding the phasing out, and details for services available to provide them with counselling and support.

RECOMMENDATION 29

Prior to the date for contact vetoes ceasing to have an effect, the Department of Communities (Post-Adoption Services) is to contact every individual who holds a contact veto under the *Adoption Act 1994* and is to provide them with information regarding the amendments and details for services available to provide them with counselling and support.

15.153 The Committee notes that the above phasing out will not include Court orders made under section 83 of the *Adoption Act 1994*. These protections are necessary and ought to continue. Their application in relation to information and records is considered in Chapter 12.

15.154 Implementation of the above recommendations regarding contact vetoes should be done in a sensitive and trauma-informed way.

Other legislative change

15.155 Contributors drew attention to some of the significant ways in which current legal frameworks are forming obstacles for those affected by forced adoption. In many cases, these are the symptom 30 year-old Act which does not reflect modern attitudes and values.

15.156 This section considers the most problematic features of the law regarding adoption, and sets out recommendations for statutory reform.

15.157 The implementation of some recommendations from the Royal Commission into Institutional Responses to Child Sexual Abuse also provides insight to potential challenges. The Community Development and Justice Standing Committee's report on options for survivors of institutional child abuse[2121] found the common law position meant that any civil litigation on matters of child sexual abuse dies when the plaintiff dies, and cannot be carried on by their estate.

15.158 The Committee does not wish to see this issue repeated for those affected by forced adoption. Many mothers are advanced in age. Allowing delays and the passage of time to extinguish their claim would provide an unjust advantage to defendants in such claims.

15.159 Implementation of the preceding recommendations should include necessary amendments to existing legislation to ensure civil actions can be continued by the estate of the plaintiff.

RECOMMENDATION 30

The Attorney General introduce amendments to relevant legislation to ensure that civil litigation on matters of past forced adoption (including those brought under any legislative changes resulting from Recommendation 23) can continue by the estate of the plaintiff.

15.160 The Legislative Assembly report also considered that the changes affecting civil actions for child sexual abuse had increased the work of the District Court but there had been no increase in the number of Registrars.

15.161 The preceding recommendations are likely to increase the workload for the court system. The resources available to manage these new claims must be monitored and managed.

[2121] Community Development and Justice Standing Committee, *Seeking Justice: Improving options for survivors of institutional child abuse*, Vol 1, Western Australia, Legislative Assembly, November 2023.

Discharge of adoption orders

15.162 When an adoption order has been made, it cannot be appealed against, reviewed, called into question or affected by any court on any account except through a discharge or a specific provision of the *Family Court Act 1997*.[2122]

15.163 The Adoption Act provides for the discharge of an adoption order. The Family Court of Western Australia deals with these applications.

15.164 An application to discharge may be made by the Attorney General, the CEO of the Department of Communities, or an adult adoptee who has notified the CEO of the Department of Communities of their intention to apply.[2123]

15.165 The Court may make an order to discharge an adoption order if it is satisfied of any of the following:

- the order was obtained by fraud, duress or other improper means
- a consent relied on for the making of the adoption order was not an effective consent because it was obtained by fraud, duress or material inducement, or
- there is some exceptional reason why the order should be made.[2124]

15.166 The above grounds for discharge are broad enough to address the prominent issues seen by the Committee in evidence of forced adoptions.

15.167 Contributors stated that there is no fee for discharge of an adoption order in Western Australia.

15.168 When considering the discharge of adoptions, the Committee was neither able to find clear guidance on the website of the Family Court of Western Australia about the process, nor prescribed form to make the application. For the discharge, the Department of Communities website states:

> Persons who wish to make an application are required to advise the Chief Executive Officer of Communities of this intention in writing. Further information about the grounds for a discharge can be obtained by contacting Adoption Services. Applicants may wish to seek independent legal advice.[2125]

15.169 From the above, it appears that adopted persons are being forced to contact the Department of Communities to obtain information on a prospective application to discharge their adoption.

15.170 As required by the current provisions for discharge of an adoption, the Committee does consider it appropriate for an applicant to notify the CEO of the Department of Communities that they intend to apply for an order discharging their adoption. The Department is well-placed to assist in making reasonable efforts to notify all parties to the adoption about the application.[2126] However, where the application is made on the basis that it was a forced adoption,[2127] it is not appropriate for the Department to be the agency notified.

2122 *Adoption Act 1994* (WA) s 77(8). See also the *Family Court Act 1997* (WA) s 211(3), which applies specifically to appeal of decrees.

2123 *Adoption Act 1994* (WA) s 77(3).

2124 *Adoption Act 1994* (WA) s 77(2).

2125 Department of Communities, *Past adoption information and support*, wa.gov.au, 2024, accessed 19 June 2024.

2126 As is required by the *Adoption Act 1994* (WA) s 77(3)(b) for an application to succeed.

2127 Pursuant to s 77(2)(a) and (b) of the *Adoption Act 1994* (WA).

15.171 Recommendations 10, 18, and 20 seek that a standalone unit be established within the Department of Justice. The Committee considers it appropriate that this standalone unit be the authority notified in the event of an application to discharge, where that application is made on the basis that it was a forced adoption.

15.172 However, the Committee does not consider it appropriate for the Department of Communities to be the holder of information and forms for the discharge of an adoption. This role is inappropriate, given the involvement of the Department in past forced adoption, and the findings within this report that it has provided incorrect or misleading information to those affected by adoption, both historically and in the 21st century.

15.173 There is significant risk that an adopted person will be dissuaded from pursuing information or an application that is open to them at law, whether because hesitant to contact the Department and discuss such a personal matter, or because they do discuss this with the Department and are left with an incorrect understanding of their legal position.

15.174 Those affected by forced adoption must be provided with the opportunity to inform themselves about their legal options without requiring the involvement of a third party, including the Department. Information about discharging an adoption, and any forms required to do so, should be made publicly available on the Family Court of Western Australia website.

RECOMMENDATION 31

The Attorney General direct the Department of Justice to provide clear and current information about discharging an adoption and the forms required. This information be included on the Family Court of Western Australia website.

15.175 One contributor had been adopted twice.[2128] Their adoptive mother had later married, and adopted them a second time jointly with her new husband. This contributor had been unable to discharge their adoptions. The Committee recognises the second adoption was only able to occur due to the first, forced, adoption. It is important that this impact is considered when determining discharge applications, so that adopted people who were subjected to multiple adoptions are not barred from discharging their adoptions.

Offences under the Adoption Act

15.176 The Adoption Act establishes several offences relating to adoption. Some of these offences have not kept pace with the understandings of past forced adoption, and community attitudes and values.

15.177 Section 108(3) binds contact and mediation agencies to comply with a contact veto. Where they fail to do so, licensees currently commit an offence. This offence has been considered above in paragraphs 15.138 to 15.142 in relation to greater consideration of contact vetoes. Provisions relating to contact and mediation agencies more broadly are considered in Chapter 13.

15.178 Section 124 prohibits publishing material that identifies, or is likely to identify, a range of persons in relation to adoption. This includes those who were a party to the adoption, a party to court proceedings in relation to an adoption, those whose consent to the adoption was required, or a relative of a person who was a party to an adoption or court proceedings in relation to an adoption. Some limited exceptions are provided. A person may be identified if they are 18 or more years of age and consent in writing.

[2128] Submission 152.

15.179 The offence in section 124 is clearly tied to the history of adoption. As considered by this report, in the early 20th century perceptions were that adopted children were usually illegitimate, and attitudes towards illegitimate children (and their mothers) were negative.

15.180 When the legal framework for adoption developed, it was often in the direction of closing off access to records, and increasing secrecy. The lauded benefit from this was to avoid mistreatment or harassment of adopted children on the basis that they had been adopted (and therefore likely illegitimate). However, another considerable advantage was that adoptive parents were enabled to conceal the fact they had adopted at all, including from their adopted child. Section 124 is an echo from this history of adoption law.

15.181 Attitudes towards adoption and illegitimate children are no longer as severe as they were in the 20th century. Identity, truth telling, and sharing their experiences is very important to those affected by forced adoption. However, not every adopted person wishes for their status to be shared, especially publicly and by people other than themselves. Doing so would invade the privacy of a deeply personal and potentially traumatic matter.

15.182 The current exception for consent in writing from a party to an adoption prior to publishing identifying details about them ensures that no further harm and trauma is caused to those affected by forced adoption.

15.183 However, the current offence extends not only to identifying the parties to adoption, but also to material that is 'likely to identify' their relatives. The Committee is concerned that this aspect of the offence may go too far. Where a parent or adopted person wishes to publish their account by any means, and identifies themselves when doing so, then surely many of their relatives will be easily identifiable as a result.

15.184 The broader public is already provided with general protections under the law. The Committee does not agree that relatives of parties to an adoption should be provided with additional protection above and beyond this.

RECOMMENDATION 32

The Attorney General introduce a bill amending section 124 of the *Adoption Act 1994* removing relatives under (1)(e) from the classes of persons whose identities are protected by that offence.

15.185 Section 126 prohibits acts intended or likely to harass, intimidate, embarrass, or ridicule another person by reason of them being a party to an adoption or a relative of a party to an adoption. There are no exceptions provided. As with section 124, this offence is closely tied to the history of adoption law and the social attitudes towards adoption.

15.186 There was no evidence of any investigations or prosecutions of alleged offences under section 126. Issues of harassment or intimidation can already be dealt with under more general criminal and civil law that applies to all members of the public. The Committee is of the view that where possible, these issues are better dealt with in that arena because it is likely that any prosecuting authorities and the courts will be more familiar with the relevant law and well-practiced in its application.

15.187 While embarrassing or ridiculing a person could form part of broader harassment and/or intimidation, on a lower level these issues may not be addressed by more general laws for the broader public. While embarrassing or ridiculing a person is poor behaviour, the Committee is not of the view that it should be elevated to an offence where it is connected to adoption. In particular, the current provisions of section 126 are at risk of extending to a situation where a relative of an adopted person is embarrassed by that adopted person sharing their status, despite the cause of the embarrassment being true. While it appears to the Committee that it would be extremely unlikely for such a matter to be pursued, it is problematic that it is even a possibility.

RECOMMENDATION 33

The Attorney General introduce a bill repealing section 126 of the *Adoption Act 1994*.

15.188 Section 127 of the *Adoption Act 1994* makes it an offence to make a record of, or make use of, or disclose or communicate to another person, certain information. In broad terms, that information is the information contained in documents relating to adoption, the parties to an adoption, or the discharge of an adoption order. There are certain exceptions including where the behaviour is in accordance with the Act or any other law, or where it is for the purposes of certain court proceedings.

15.189 Where the information or records referred to contain personal information, there is already protection provided by the *Privacy Act 1988* (Cth), *Freedom of Information Act 1992* (WA) and potential future legislation.[2129] Specific offences relating to adoption information and records risk creating an environment that is unnecessarily restrictive regarding access to information and records. The framework for access to information and records more broadly has been considered within Chapter 12 of this report.

15.190 The Committee is of the view that the broader protections for personal information and privacy include documents relating to adoption, and no additional and specific protections are necessary.

RECOMMENDATION 34

The Attorney General introduce a bill repealing section 127 of the *Adoption Act 1994*.

Notifications to those affected by forced adoption

15.191 The current adoption law in WA provides for the CEO of the Department of Communities to notify people of the death of a party to adoption in certain circumstances. In brief, this includes the following:

- Where an adopted person has died, their parents are informed if the CEO considers that it is reasonably practicable, and appropriate to do so (having regard to the adoption plan);[2130] and
- Where a party to the adoption or a sibling of the adoptee has died, the other parties to the adoption or the adoptee's siblings are informed, so far as the CEO considers that it is reasonably practicable to do so.[2131]

15.192 The CEO does not have to inform a person as set out above if the person has notified the CEO that they do not want to be advised of this, or in special circumstances. What qualifies as special circumstances is not clarified by the Act.

15.193 How this is implemented in practice is not clear to the Committee from the available evidence. The law alone gives considerable discretion for the CEO to decide not to notify a person.

[2129] At the time of preparing this report, the *Privacy and Responsible Information Sharing Bill 2024* is before the Legislative Council.

[2130] *Adoption Act 1994* section 80(1).

[2131] *Adoption Act 1994* section 80(2).

15.194 Some contributors sought that all adult adoptees be notified that they are adopted.[2132] Some expressed concern that without this notification, many adult adoptees may never be informed and might go through their lives without knowing. As described at paragraphs 9.72 to 9.74, those who discover their adopted status late in life often find out following the death of an adoptive parent, which severely complicates an already difficult time. Some find out by accident. Both of these situations are extremely harmful and have grave mental health consequences. With the passing of time, the chances for an adopted person to seek information from their adopted parents and relatives, to connect with original family and to have the opportunity to meet, develop relationships and gain insight into their origins diminishes.[2133]

15.195 Where a person is not informed that they have been adopted it deprives them of the ability to make many informed decisions. A person who is unaware they were adopted will be unable to choose whether to pursue information about their parents or possible family members. They are unable to choose whether to attempt contact or a reunion. Where adopted by a family from a different cultural or ethnic background, they lack the choice to seek out connections with their culture and with others of their background as a member of that group.

15.196 In addition to adopted people, there were many fathers who were never told they had a child, who was then adopted. Many contributors shared their experiences reaching out to fathers who had never known they existed. Fathers should not be denied the knowledge that their child was born, or the opportunity to pursue information about their adoption or to connect with them.

15.197 Chapter 12 considered the difficulty faced by adopted persons when seeking medical advice and treatment when they do not know their family history. This issue is even more serious for adopted people who are not aware of their adoption, because they are likely to provide and rely upon information about hereditary medical conditions in their adopted family rather than their actual family of origin. This could unintentionally mislead health professionals who are attempting to treat them, potentially with serious implications.

FINDING 71

There are people who were adopted in Western Australia who are currently not aware of their adopted status.

15.198 In the 2018 statutory review of the Adoption Act, the Department of Communities provided a submission and sought that the provisions for notifications under section 80 of the Act only be required where the siblings or parties have had previous contact with the Department.[2134] The statutory review noted:

> In considering this issue, a person's fundamental right to information that affects them was highlighted and there must be very strong justification to impinge upon this right.[2135]

2132 For example: Submission 33; Submission 46; Submission 63; Submission 80; Submission 90; Submission 112; Submission 125; Submission 128; Private individual 3, transcript of evidence; Private individual 13, transcript of evidence; Private individual 24, transcript of evidence; J McRae, Parliament of Western Australia, principal petitioner submission, 2023, accessed 3 October 2023.

2133 See K de Cinque, Counsellor, Adoption Research and Counselling Service, transcript of evidence, Legislative Council, 9 October 2023.

2134 Department of Communities, *Statutory Review of the Adoption Act 1994*, November 2018, p 35.

2135 Department of Communities, *Statutory Review of the Adoption Act 1994*, p 36.

15.199 The review did not recommend any changes to the legislation, but recommended increased practice guidance to help facilitate consideration of matters that may constitute special circumstances under section 80 of the Act.[2136]

15.200 No information was before the Committee regarding the Department's implementation of this recommendation. From the Department's response to the Committee about broader notifications (which is considered below), it appears unlikely that the Department is eager to interpret its discretion regarding notifications in a way that favours notifying those who are not aware of an adoption.

15.201 The Committee's view is that the current practice regarding special circumstances should be clarified. The Committee is also of the view that a person's lack of awareness that they are adopted, or have a child or relative who has been adopted, should not prevent them from being notified of a death under section 80.

RECOMMENDATION 35

The Minister for Community Services direct the Chief Executive Officer of the Department of Communities to clarify the circumstances in which the Chief Executive Officer will and will not provide notification under section 80(1) or 80(2) of the *Adoption Act 1994*.

This include clarification that a lack of awareness by a party they are adopted, or have a relative who has been adopted does not constitute 'special circumstances' for the purposes of section 80(3) of the *Adoption Act 1994*.

15.202 As noted in the 2018 statutory review, a person has a fundamental right to information that affects them. This right should not be impinged for those affected by forced adoption just because this occurred in the past.

15.203 It is possible that receiving this information could cause harm to some of those involved in forced adoption. In many cases, some harm may be inevitable. However, even if government departments choose not to notify these people, this does not prevent them from becoming aware through other means, as described above. In response to a question on this issue from the Committee, the Department of Communities stated:

> Communities would not support a recommendation to inform all adopted people of their adoption status. A person's individual understanding of their identity and sense of belonging is closely related to their mental health. The unilateral imposition of adoption information upon a person has the potential to cause significant harm and distress to their psychological health and wellbeing. Given that Communities does not know the psychological state of the recipients of this information, there is a significant risk of unintended harm in this course of action.[2137]

15.204 The Committee agrees that there is a fundamental connection between mental health, identity, and sense of belonging. However, this forms part of the reason for government to inform those unaware of their adopted status. Choosing not to inform them, out of a motivation not to destabilise or cause harm, does not account for the fact that harm *has been* and *is being* done to them without their awareness, both in relation to the framing of their lives through basic untruths and in relation to medical advice and decisions based on incorrect information. Failing to inform people also compounds the negative effect of later discovery, by extending the length of time that integral information was withheld.[2138]

[2136] Department of Communities, *Statutory Review of the Adoption Act 1994*, p 36, and Recommendation 24.

[2137] Department of Communities, email, 7 June 2024.

[2138] On the impact of discovering adopted status as an adult, see discussion from paragraph 9.72.

15.205 The Committee is of the view that the possible harm from notification does not outweigh the other harms which may be caused if and when they become aware, and which are being done to them without their knowledge. Any harm is deeply regrettable, but the ability for individuals to make decisions with complete information about their circumstances must be returned.

15.206 The Department of Communities listed several considerations which mean that, in practice, notifying all those who have been adopted will be difficult, and notifying some people may not be possible. While these practical difficulties are acknowledged by the Committee, they do not negate the need for adopted people to be notified of their status, wherever possible.

RECOMMENDATION 36

The WA Government notify all adult adopted persons not already aware of their adopted status.

15.207 There is no clear pathway for a concerned person to confirm whether or not they have been adopted, or are the parent of an adopted person. The most effective method appears to be to apply for non-identifying information from the Department of Communities, as though they were in fact adopted. The existence of that information could confirm an adoption had taken place.

FINDING 72

Currently there is no clear process for an adult person to confirm whether they were adopted in Western Australia.

15.208 A more efficient pathway should be made available. A concerned person should be able to apply to the Department of Communities for simple confirmation as to whether they are recorded as a party to an adoption.

RECOMMENDATION 37

The Minister for Community Services direct the Department of Communities (Post-adoption services) to implement a process for adults to apply for confirmation they are recorded as a party in any adoption in Western Australia.

Consultation and transparency

15.209 Just as apologies are empty without actions, a commitment not to repeat the mistakes of the past is essential to re-establishing trust between those affected by forced adoption and the WA Government, institutions and organisations involved. It is also important for the wider public who were and remain largely unaware of this episode in our state's recent history.

> You are talking about a group of people who do not trust institutions, governments. Why would they? They took the thing that was most important.
>
> - Private individual 4, transcript of evidence

15.210 To that end, transparency regarding adoption as it exists today is essential, as is consultation about how it and similar practices are managed into the future.

15.211 Those with lived experience asked for reassurance that forced adoption is well and truly in the past. Adoptions in WA last century occurred on a large scale and individuals were intimately affected and remain so. It is important that information about the current place of adoption in the WA community, and governmental approaches to it, is freely available. Since 2018, the Department of Communities has published annual adoption data within its Child

Protection Activity Performance Information reports.[2139] As occurred in Victoria following their similar inquiry, figures relevant to adoptions taking place in WA today could be published, kept updated, and made easily accessible via an area dedicated to adoption information online.[2140]

15.212 There must also be greater clarity around reviews of the Adoption Act, the whole of which is of interest to those with lived experience of forced adoption, and parts of which continue to have a direct impact on them.

15.213 In 2021 a contributor to this inquiry received correspondence from Hon Simone McGurk, then Minister for Community Services, stating that the 'the Act is reviewed every five years, with the last review occurring in 2018'.[2141] However, when the Committee asked, the Department stated: 'A 2023 Statutory Review is not provided for under the *Adoption Act 1994*'.[2142]

15.214 Further, at its hearing the Department testified that it was progressing recommendations of the 2018 statutory review of the Adoption Act as a priority. However, in recent communication to the Committee they said both that the 2018 review is being implemented, and that:

> Amendments to the *Adoption Act 1994*, including those arising from the 2018 Statutory Review, will be considered by the Government once the Inquiry into past forced adoptive policies and practices has concluded.[2143]

15.215 Those affected by forced adoption await implementation of the 2018 review and are confounded as to the time that is passing while the issues raised in that review remain.

> The 2018 review of the 1994 Adoption Act remains incomplete and as such no longer holds validity with which to address current issues owing to the six-year delay. Why the delay?[2144]

15.216 As expressed above, the Committee is dismayed that this inquiry, commenced to benefit those affected, is being used by government as a reason not to act in relation to the last legislative review.

15.217 The Committee considers it vital that WA citizens have clear information about legislation concerning adoption, the timing and outcomes of statutory reviews, and the progress of implementation of those reviews. This too should be made available online by the WA Government.

RECOMMENDATION 38

The Minister for Community Services direct the Department of Communities to publish accurate online information about the numbers and kinds of adoptions occurring in the state each year, legislation relevant to adoption, the status of reviews of that legislation and progress on implementing review changes.

2139 Department of Communities, letter, 15 September 2023. The most recent figures, for the 2022–23 financial year, include 5 local non-relative adoptions, and 1 inter-country adoption (Department of Communities, *Child Protection Activity Performance Information 2022–23*, wa.gov.au, 2023, accessed 20 July 2024, p 26).

2140 See: Victorian Government, *Annual adoption data*, vic.gov.au, 2024, accessed 14 February 2024.

2141 Submission 15.

2142 Department of Communities, email, 7 June 2024.

2143 Department of Communities, email, 7 June 2024.

2144 Submission 110.

15.218 It is imperative that any action taken to ameliorate the impact of forced adoption and address the ongoing needs of those affected occurs in consultation with them.

15.219 For a long time, there has been a mismatch between the needs of those who experienced forced adoption and the services intended to assist them. To obtain vital information about themselves people currently have to engage with 'Post-Adoption Services'; however, adoption is not past for those who were adopted, and those whose children were adopted. Rather, it is a reality that they live daily.

15.220 When it comes to the question of how to realise the changes recommended in this report, it the Government should consult with the lived experience community. They are best placed to know what they need and want to be involved in the design of services aimed at them.[2145] They also want to have input into issues for which their experiences of forced adoption are relevant.[2146]

15.221 Since the mid-1970's, the NSW Committee on Adoption and Permanent Care (COAPC) has existed to provide a voice directly to adoption service providers and organisations operating in the post-adoption support space. Its members are both organisations relevant to past and present adoption and individuals with lived experience of adoption, and at times its meetings include Government representatives. COAPC told the Committee:

> For many who are impacted by forced adoption they were voiceless, their thoughts, views, opinions, and stance on important issues directly relevant to them were never sought or valued. This is an important way we can give them a seat at the table and hear their voices and give these voices weight and careful consideration in any adoption related legislative reviews and advocacy actions for the adoption community.
>
> …
>
> we would recommend a similar committee be established in WA as the importance of the sector coming together and those with the ongoing experience of the impact of adoption having a voice is the only way we never repeat the mistakes of the past.[2147]

15.222 In the Committee's view, a WA body similar to COAPC in NSW has many benefits, including for the design and implementation of a redress scheme, and ongoing legislative change. The WA Government could consider practical support for creating such a body and commit to participating upon invitation.

15.223 At the least, the WA Government should establish an inclusive reference group consisting of those affected by past forced adoption and relevant support organisations to ensure its actions are informed by the needs and experiences of all stakeholders. The Committee was informed that, at present, the Department of Communities facilitates an adoption sector meeting each quarter, which includes members of ARMS and service providers, but not adopted people.[2148]

2145 See Private individual 18, transcript of evidence.

2146 For example: Submission 128.

2147 S Burn, Acting Chair, NSW Committee on Adoption and Permanent Care, letter, 10 May 2024. See also: NSW Committee on Adoption and Permanent Care, *Our History*, coapc.org.au, 2011–2013, accessed 12 June 2024.

2148 Submission 63; Submission 110.

RECOMMENDATION 39

The WA Government establish an adoption reference group inclusive of mothers, fathers, adopted people, and First Nations people with lived experience of forced adoption, as well as relevant service providers when appropriate.

15.224 Understandably, participants in this inquiry remain concerned about adoption. Both mothers and adopted people called for change, based on their first-hand experiences of the havoc wreaked on lives by the practice. An adopted person submitted:

> People with lived experience of open adoption experience the same issues during reunion as adult adopted people, except they are children without life skills and emotional maturity trying to cope with an unnatural situation. There is no reason for adoption to exist when a child needs care. The child just needs care, not a new identity.[2149]

15.225 Psychologist Margaret van Keppel pioneered research into and support for WA mothers who experienced forced adoption. Ms Van Keppel submitted that current and future adoption practices and services 'must be informed and shaped by the damaging legacies of "forced adoption" practices'.[2150]

15.226 The inquiry received submissions from members of a family who have lived adoption in WA this century. Their evidence demonstrates that matters of choice and agency remain live issues for pregnant women in our community, that children continue to suffer from being adopted in recent times, and that these impacts continue into their adult lives.[2151] The tabling of this report provides an important opportunity for WA to consider the difficult truth and negative impact of the past, and how repeating it may best be avoided into our future.

There should not be a time limit for when we are prepared as a community to reflect on adoption practices and the potential for all adoptions to be in some way compelled.

- Adoption Research Counselling Service, submission 113

Hon Peter Foster MLC
Chair

[2149] Submission 46.

[2150] Submission 40.

[2151] See: Submission 65; Submission 66.

APPENDIX 1

STAKEHOLDERS INVITED TO SUBMIT

Aboriginal Health Council of Western Australia
Aboriginal Legal Services
Adoptee Rights Australia
Adoption and Research Counselling Service (ARCS)
Adoption Jigsaw WA
Anglicare WA
Apology Alliance
Archdiocese of Perth, Catholic Diocese
Association Representing Mothers Separated by adoption (ARMS WA)
Australian Health Practitioner Regulation Agency
Australian Medical Association
Australian Nursing and Midwifery Association
Australian Nursing Federation
Centacare Family Services
CentreCare
Country Women's Association of WA
Department of Communities
Department of Health
Department of Justice
Institute of Sisters of Mercy Australia and Papua New Guinea
Kalgoorlie Health Campus
King Edward Memorial Hospital
Legal Aid WA
MercyCare
Mission Australia
Multicultural Services Centre of Western Australia
Ngala
North Metro Health Service
Relationships Australia WA
Shine Lawyers
Sister Kate's Home

South Perth Community Hospital
St John of God Health Care
St Vincent de Paul Society
The Anglican Church of Australia
The Australian Association of Social Workers
The Australian Psychological Society
The Mental Health Commission
The Royal Australian and New Zealand College of Psychiatrists - WA Branch
The Royal Australian College of General Practitioners
The Salvation Army
Tuart Place
Uniting Churches
WA Country Health Service
Wanslea
Western Australian Association for Mental Health

APPENDIX 2

SUBMISSIONS RECEIVED

Number	From	Date
1	Name withheld	23 February 2023
1a	*Supplementary submission*	7 March 2023
1b	*Supplementary submission*	27 October 2023
1c	*Supplementary submission*	21 January 2024
2	Name withheld	23 February 2023
3	Wendy Hebron	24 February 2023
4	Name withheld	23 February 2023
4a	*Supplementary submission*	24 February 2023
5	Name withheld	9 May 2023
6	Judith Hendiksen	28 February 2023
6a	*Supplementary submission*	28 March 20223
6b	*Supplementary submission*	28 March 2023
7	Lesley Horn	6 May 2023
8	Stephen Marshall	8 May 2023
9	Confidential	13 March 2023
10	Confidential	13 March 2023
11	Sharon Pendreigh	13 March 2023
12	Merle Davis	15 March 2023
13	Annette Farinosi	15 March 2023
13a	*Supplementary submission*	7 May 2024
14	Leilani Hannah	16 March 2023
14a	*Supplementary submission*	16 March 2023
15	Suzanne Maynard	18 May 2023
16	Crib Mates	27 March 2023
17	Name withheld	27 March 2023
18	Confidential	3 May 2023

Number	From	Date
19	Confidential	1 May 2023
20	Confidential	3 April 2023
20a	*Supplementary submission*	24 July 2023
21	Name withheld	3 April 2023
22	Glennys Fragomeni	7 April 2023
23	Margaret Nonas	8 April 2023
24	Katrina Farrelly	11 April 2023
25	Confidential	23 February 2023
26	Lisa Bodley	23 March 2023
27	Jacqueline Villanova	17 April 2023
28	Lyn Kinghorn	17 April 2023
28a	*Supplementary submission*	12 May 2023
29	Confidential	24 April 2023
30	Confidential	24 April 2023
31	Michael Grenfell	12 May 2023
32	Michael Hickey	17 May 2023
33	Confidential	22 May 2023
34	Jane Dicks	23 May 2023
34a	*Supplementary submission*	23 May 2023
35	Name withheld	26 May 2023
36	Mental Health Commission	30 May 2023
36a	*Supplementary submission*	30 June 2023
37	Helen Margot Murphy	31 May 2023
38	Amanda McLennan	2 June 2023
39	Confidential	2 June 2023
40	Margaret van Keppel	5 June 2023
40a	*Supplementary submission*	5 June 2023
41	Name withheld	5 June 2023
42	Teresa Tholstrup	5 June 2023

Number	From	Date
43	Name withheld	6 June 2023
44	Denise Jensen	31 May 2023
45	Confidential	6 June 2023
46	Name withheld	8 June 2023
46a	*Supplementary submission*	8 June 2023
46b	*Supplementary submission*	13 January 2024
47	Vicki Hawley	8 June 2023
48	Raymond Charles De Jong	9 June 2023
49	Ngala	9 June 2023
50	Maryla Rowcroft	9 June 2023
51	Relationships Australia WA	9 June 2023
51a	*Supplementary submission*	26 October 2023
52	Cheryl Feeney	12 June 2023
52a	*Supplementary submission*	27 May 2024
53	DES Action NSW	12 June 2023
54	Confidential	12 June 2023
54a	Kavita Forman	21 August 2023
55	June Smith	13 June 2023
56	Susanne Cutten	14 June 2023
57	Name withheld	14 June 2023
58	Andrea Fewster	14 June 2023
58a	*Supplementary submission*	4 September 2023
59	Sue MacDonald	14 June 2023
59a	*Supplementary submission*	23 February 2024
59b	*Supplementary submission*	21 May 2024
60	Confidential	14 June 2023
61	Michael Hawley	14 June 2023
62	Institute of Sisters of Mercy of Australia and Papua New Guinea	14 June 2023
63	Danae Witherow	14 June 2023

Number	From	Date
63a	*Supplementary submission*	14 June 2023
64	Confidential	14 June 2023
65	Name withheld	14 June 2023
66	Name withheld	14 June 2023
67	Helen Russell	14 June 2023
67a	*Supplementary submission*	14 June 2023
68	Shannon Quinlan	15 June 2023
68a	*Supplementary submission*	15 June 2024
69	Department of Health	15 June 2023
70	Name withheld	15 June 2023
71	Gaye McPhie	15 June 2023
72	Christine Cole	15 June 2023
73	Kathleen Maczkowiack	15 June 2023
74	Name withheld	15 June 2023
75	Confidential	15 June 2023
76	Name withheld	16 June 2023
77	Josephine Wilson	16 June 2023
78	Ian Pownall	16 June 2023
79	Jane Dent	16 June 2023
80	Confidential	16 June 2023
81	Barbara Maison	16 June 2023
81a	*Supplementary submission*	6 November 2023
81b	*Supplementary submission*	26 March 2023
82	Carmen Burdett	16 June 2023
83	Confidential	16 June 2023
84	Adoption Jigsaw WA	16 June 2023
84a	*Supplementary submission*	16 June 2023
85	Confidential	16 June 2023
86	Confidential	16 June 2023

Number	From	Date
86a	*Supplementary submission*	16 June 2023
87	Confidential	16 June 2023
88	Confidential	16 June 2023
89	Confidential	16 June 2023
90	Confidential	16 June 2023
91	Australian Psychological Society	16 June 2023
92	Name withheld	16 June 2023
93	Maree Pryce	16 June 2023
94	Christine Kershaw	16 June 2023
95	Judy McHutchison	16 June 2023
96	Name withheld	16 June 2023
97	Name withheld	16 June 2023
98	Name withheld	16 June 2023
99	Private citizen	16 June 2023
99a	*Supplementary submission*	31 July 2023
99aa	*Supplementary submission*	20 March 2024
99b	*Supplementary submission*	17 August 2023
99c	*Supplementary submission*	9 October 2023
99cc	*Supplementary submission*	22 January 2024
99ccc	*Supplementary submission*	28 March 2024
99d	*Supplementary submission*	8 November 2023
100	Margaret Wellstead	16 June 2023
101	Association of Relinquishing Mothers Inc (ARMs) (Vic)	17 June 2023
102	Name withheld	17 June 2023
103	Confidential	16 June 2023
104	Name withheld	14 June 2023
105	Confidential	20 June 2023
106	Department of Communities	16 June 2023
106a	*Supplementary submission*	12 April 2024

Number	From	Date
107	Cindy Stahl	16 June 2023
108	Marilyn Rulyancich	20 June 2023
109	Helen Driesen	20 June 2023
110	Jennifer McRae	20 June 2023
110a	*Supplementary submission*	20 June 2023
111	Confidential	22 June 2023
111a	*Supplementary submission*	23 November 2023
111b	*Supplementary submission*	13 March 2023
112	Abraham Maddison	23 June 2023
113	Adoption Research and Counselling Service (ARCS)	23 June 2023
114	Name withheld	3 July 2023
115	Confidential	28 June 2023
116	Confidential	4 July 2023
116a	*Supplementary submission*	4 July 2023
117	Confidential	14 July 2023
118	Mark Hill	16 July 2023
119	Kimmi Overend	25 July 2023
120	Confidential	27 July 2023
121	Confidential	28 July 2023
122	Carol Seidel	30 July 2023
123	Confidential	30 July 2023
124	Confidential	30 July 2023
124a	*Supplementary submission*	2 November 2023
125	Peter Capomolla Moore	31 July 2023
126	Confidential	31 July 2023
127	Slater and Gordon	31 July 2023
128	Adoptee Rights Australia	31 July 2023
129	Confidential	31 July 2023
130	Bob Peters	6 August 2023

Number	From	Date
131	Name withheld	7 August 2023
132	Confidential	11 August 2023
133	Origins Supporting People Separated by Adoption (SPSA)	12 August 2023
133a	*Supplementary submission*	23 August 2023
133b	*Supplementary submission*	11 October 2023
134	Confidential	14 August 2023
135	Elizabeth Brew	31 August 2023
135a	*Supplementary submission*	31 August 2023
135b	*Supplementary submission*	31 August 2023
136	Antonietta Sanfilippo	27 August 2023
137	Australian Association of Social Workers	1 September 2023
138	Matt Marchment	5 September 2023
139	The Royal Australian and New Zealand College of Psychiatrists (Western Australian Branch)	7 September 2023
140	Confidential	9 September 2023
141	The Salvation Army	15 September 2023
141a	*Supplementary submission*	15 September 2023
141b	*Supplementary submission*	15 September 2023
142	Bev Dixon	22 September 2023
142a	*Supplementary submission*	29 September 2023
143	Gordon Hall	27 September 2023
144	Glenda Gittings	4 October 2023
145	Department of Justice	6 October 2023
146	Confidential	11 October 2023
147	Alison Ingram	26 October 2023
148	Name withheld	4 November 2023
148a	*Supplementary submission*	1 December 2023
149	Confidential	17 January 2024
150	Confidential	29 April 2024
150a	*Supplementary submission*	27 July 2024

Number	From	Date
151	Confidential	17 June 2024
152	Confidential	2 July 2024
153	Great Southern Adoptee Support Group	29 July 2024
154	Name withheld	2 August 2024

APPENDIX 3

HEARINGS AND BRIEFINGS

Private hearings

The following individuals wished to be named as having appeared as witnesses before the Committee:

- Abraham Maddison
- Andrea Fewster
- Anne Haylock
- Bart Clingin
- Christine Kennedy
- Christine Kershaw
- Damien Duff
- Danae Witherow
- Glennys Fragomeni
- Janine Gurdon
- Jennifer McRae
- Dr Jillian Powell
- Kimmi Overend
- Lisa Moore
- Margaret van Keppel
- Marilyn Rulyancich
- Mark Hill
- Michael Hickey
- Susanne Cutten

Number	Participants	Date
1	Private individual (in Albany)	4 September 2023
2	2 private individuals (in Albany)	4 September 2023
3	Private individual (in Albany)	4 September 2023
4	Private individual (in Albany)	4 September 2023
5	Private individual (in Albany)	4 September 2023
6	Private individual	9 October 2023
7	Private individual	23 October 2023
8	Private individual	23 October 2023
9	Private individual	23 October 2023
10	Private individual	23 October 2023
11	Private individual	23 October 2023
12	Private individual	23 October 2023
13	Private individual	24 October 2023
14	Private individual	24 October 2023
15	Private individual	24 October 2023
16	Private individual	24 October 2023
17	Private individual	24 October 2023

Number	Participants	Date
18	Private individual	25 October 2023
19	Private individual	25 October 2023
20	2 private individuals	25 October 2023
21	Private individual	25 October 2023
22	Private individual	25 October 2023
23	Private individual	26 October 2023
24	Private individual	26 October 2023
25	Private individual	26 October 2023
26	Private individual	26 October 2023
27	Private individual	26 October 2023
28	Private individual	15 November 2023
29	Private individual	19 July 2024
30	Private individual	19 July 2024

Public hearings

Date	Participants
18 September 2023	Department of Communities • Mike Rowe, Director General Department of Communities • Caron Irwin, Assistant Director General • Ben Whitehouse, Executive Director State-wide Services • Liesel Gage, Team Leader Adoption Services
18 September 2023	Adoption Jigsaw WA • Isabel Andrews, Manager/Counsellor
9 October 2023	North Metropolitan Health Service, Department of Health • Dr Shirley Bowen, Chief Executive
9 October 2023	Adoption Research and Counselling Service (ARCS) • Jennifer Newbould, Manager/Counsellor • Kaila de Cinque, Counsellor
9 October 2023	Institute of Sisters of Mercy of Australia and Papua New Guinea • Sister Eileen Ann Daffy OAM, Sister of Mercy • Anna Liscia (Irdi Legal), Lawyer

Date	Participants
9 October 2023	The Salvation Army • Miriam Gluyas, Commissioner • Carlie Alcock (Mills Oakley Legal), Lawyer • Luke Geary (Mills Oakley Legal), Lawyer
26 October 2023	Ngala • Michelle Dillon, Chief Executive Officer
12 June 2024	Tuart Place • Dr Philippa White, Director • Joanne Faulkner, Executive Support Manager

Briefings

Date	Participants
14 February 2024	Department of Justice and Community Safety, Victoria (via videolink) • Vivienne Clare – Executive Director, Police and Community Safety • Martin van Tijn – Director Redress Design and Delivery • Stephanie Houten – Manager Forced Adoptions Inquiry Implementation • Angela Karavidas – Manager Adoption Information Service
14 February 2024	DES Follow-up Clinic, Royal Women's Hospital, Melbourne (via videolink) • Dr Ross Pagano – Obstetrician and Gynaecologist, former Clinic Head
17 April 2024	Forced Adoption Support Service (Relationships Australia WA, Belmont) • Reg Casley – Senior Manager Adult Specialised Services • Tracey Graham – Records and Research Officer • Lynn Burns – Senior Customer Service • Katie Woodley-Smith – Counsellor/Case Manager

APPENDIX 4

WA ADOPTION STATISTICS

Financial year ending	Total adoption orders	Adoption orders (Department)	Adoption orders (private)
1940	133	122	11
1941	166	149	17
1942	215	201	14
1943	140	123	17
1944	188	154	34
1945	231	123	108
1946	243	128	115
1947	244	161	83
		To approved applicants 97 Adopted by relatives 64	
1948	244	150	94
		Number of wards adopted 11	
1949	253	183	70
		Number of wards adopted 18	
1950	274	198	76
		Number of wards adopted 10	
1951	275	191	84
		Number of wards adopted 12	
1952	258	145	113
		To approved applicants 84 Adopted by relatives 61	
1953	273	113	160
		Child to approved applicants 58 Adopted by relatives 55	
1954	237	70	167
1955	288	76	212

Financial year ending	Total adoption orders	Adoption orders (Department)		Adoption orders (private)
		To approved applicants	36	
		Ex-nuptial adopted by mother & her husband	30	
		Ex-nuptial adopted by Grandparents	1	
		Wards of Department	7	
		Foster child	2	
1956	262		68	194
		To approved applicants	46	
		Ex-nuptial adopted by mother & her husband	12	
		Ex-nuptial adopted by Grandparents	2	
		Wards of Department	7	
		Foster child	1	
1957	277		50	227
		To approved applicants	25	
		Ex-nuptial adopted by mother & her husband	18	
		Ex-nuptial adopted by Grandparents	2	
		Foster child	2	
1958	290		85	205
		To approved applicants	53	
		Ex-nuptial adopted by mother & her husband	21	
		Child of former marriage adopted by mother & her husband	1	
		Wards of the Department	9	
		Foster child	1	
1959	316		89	227
		To approved applicants	45	
		Adopted by relatives	4	
		Ex-nuptial adopted by mother & her husband	17	
		Child of former marriage adopted by mother & her husband	3	
		Wards of the Department	15	
		Migrant child	2	
		Foster child	1	
		Legitimate child	2	
1960	332		118	214

Financial year ending	Total adoption orders	Adoption orders (Department)		Adoption orders (private)
		To approved applicants	62	
		Adopted by relatives	12	
		Ex-nuptial adopted by mother & her husband	19	
		Child of former marriage adopted by mother & her husband	12	
		Wards of the Department	6	
		Legitimate child	7	
1961	339		128	211
		To approved applicants	83	
		Adopted by relatives	5	
		Ex-nuptial adopted by mother & her husband	15	
		Child of former marriage adopted by mother & her husband	6	
		Wards of the Department	15	
		Legitimate child	4	
1962	360		164	196
		To approved applicants	97	
		Adopted by relatives	4	
		Ex-nuptial adopted by mother & her husband	16	
		Child of former marriage adopted by mother & her husband	23	
		Wards of the Department	21	
		Legitimate child	3	
1963	326		134	192
		To approved applicants	90	
		Child placed by Dept of Native Welfare	3	
		Adopted by relatives	4	
		Ex-nuptial child adopted by the mother & her husband	13	
		Wards of the Department	10	
		Migrant child	1	
		Foster child	1	
		Legitimate child	1	
1964	448		157	291

Financial year ending	Total adoption orders	Adoption orders (Department)		Adoption orders (private)
		To approved applicants	130	
		Child placed by Dept of Native Welfare	1	
		Adopted by relatives	1	
		Ex-nuptial child adopted by natural mother & her husband	5	
		Wards of the Department	13	
		Legitimate child adopted by natural mother & present husband	7	
1965	487		232	255
		Ex-nuptial – to approved applicants	176	
		Native or part-native child	15	
		Adopted by relatives	8	
		Ex-nuptial - to mother & present husband	5	
		Legitimate - to mother & present husband	11	
		Wards of the Department	11	
		Legitimate – to approved applicants	6	
1966	561		285	276
		Ex-nuptial – to approved applicants	236	
		Native or part-native child	19	
		Adopted by relatives	1	
		Ex-nuptial - to mother & present husband	12	
		Legitimate - to mother & present husband	3	
		Wards of the Department	5	
		Legitimate – to approved applicants	9	
1967	570		307	263

Financial year ending	Total adoption orders	Adoption orders (Department)		Adoption orders (private)	
		Ex-nuptial – to approved applicants	244		
		Legitimate - to approved applicants	8		
		Adopted by relatives	3		
		Ex-nuptial – to mother & present husband	14		
		Legitimate – to mother & present husband	5		
		Native or part-native child	18		
		Part-Asian child	2		
		Wards of the Department (including 2 native children)	13		
1968	611		376		235
		Ex-nuptial to approved adoptive parents	310	Ex-nuptial to approved adoptive parents	186
		Ex-nuptial adopted by relatives	2	Ex-nuptial adopted by mother & present husband	6
		Ex-nuptial adopted by mother & present husband	26	Ex-nuptial state Wards to approved adoptive parents	2
		Ex-nuptial state Wards to approved adoptive parents	4	Legitimate - adopted by mother & present husband	31
		Ex-nuptial native child to approved adoptive parents	15	Legitimate - adopted by relatives	5
		Legitimate - adopted by mother & present husband	13	Legitimate - to approved adoptive parents	5
		Legitimate - adopted by relatives	-		
		Legitimate -to approved adoptive parents	6		
1969	540		305		235
		Child's status prior to adoption		Child's status prior to adoption	
		Ex-nuptial	296	Ex-nuptial	202
		Legitimate	9	Legitimate	33

Financial year ending	Total adoption orders	Adoption orders (Department)	Adoption orders (private)
		Relationship to adoptive parents: Spouse of natural parents 16; Relatives 5; Approved adoptive parents 284	Relationship to adoptive parents: Ex-nuptial to natural mother & husband 10; Ex-nuptial to Relatives 5; Ex-nuptial to natural father 1; Ex-nuptial to Unrelated 185; Ex-nuptial adopted 1; Legitimate to natural mother & husband 31; Legitimate to relatives 2
1970	703	410	293
		Child's status prior to adoption: Ex-nuptial 400; Legitimate 10	Child's status prior to adoption: Ex-nuptial 250; Legitimate 43
		Relationship to adoptive parents: Natural parents 9; Unrelated 401	Relationship to adoptive parents: Natural parents 51; Relatives 6; Unrelated 236
1971	301	136	165
		Child's status prior to adoption: Ex-nuptial 135; Legitimate 1	Child's status prior to adoption: Ex-nuptial 136; Legitimate 29
		Relationship to adoptive parents: Natural parents 7; Relatives 2; Unrelated 127	Relationship to adoptive parents: Natural parents 34; Relatives 3; Unrelated 128
1972	457	306	151
		Child's status prior to adoption: Ex-nuptial 289; Legitimate 17	Child's status prior to adoption: Ex-nuptial 137; Legitimate 14
		Relationship to adoptive parents: Natural parents 18; Relatives 4; Unrelated 284	Relationship to adoptive parents: Natural parents 21; Relatives 1; Unrelated 129
1973	717	538	179
		Child's status prior to adoption: Ex-nuptial 509; Legitimate 29	Child's status prior to adoption: Ex-nuptial 121; Legitimate 58

Financial year ending	Total adoption orders	Adoption orders (Department)	Adoption orders (private)
		Relationship to adoptive parents Natural parents 10 Relatives 3 Unrelated 525	Relationship to adoptive parents Natural parents 66 Relatives 8 Unrelated 105
1974	783	581	202
		Child's status prior to adoption Ex-nuptial 562 Legitimate 19	Child's status prior to adoption Ex-nuptial 138 Legitimate 64
		Relationship to adoptive parents (nuptial) Natural parents 1 Unrelated 18	Relationship to adoptive parents (nuptial) Natural parents 62 Unrelated 2
		Relationship to adoptive parents (ex-nuptial) Natural parents 5 Unrelated 557	Relationship to adoptive parents (ex-nuptial) Natural parents 42 Relatives 14 Unrelated 82
1975	528	326	202
		Child's status prior to adoption Ex-nuptial 316 Legitimate 10	Child's status prior to adoption Ex-nuptial 138 Legitimate 64
		Relationship to adoptive parents (nuptial) Natural parents 3 Unrelated 7	Relationship to adoptive parents (nuptial) Natural parents 62 Unrelated 2
		Relationship to adoptive parents (ex-nuptial) Natural parents 3 Relatives 3 Unrelated 310	Relationship to adoptive parents (ex-nuptial) Natural parents 42 Relatives 14 Unrelated 82
1976	531	364	167
		Child's status prior to adoption Ex-nuptial 314 Legitimate 50	Child's status prior to adoption Ex-nuptial 96 Legitimate 71

Financial year ending	Total adoption orders	Adoption orders (Department)	Adoption orders (private)
		Relationship to adoptive parents (nuptial) Natural parents 37 Unrelated 13 Relationship to adoptive parents (ex-nuptial) Natural parents 42 Unrelated 272	Relationship to adoptive parents (nuptial) Natural parents 67 Relatives 4 Relationship to adoptive parents (ex-nuptial) Natural parents 50 Relatives 2 Unrelated 44
1977	497	376	121
		Child's status prior to adoption Ex-nuptial 295 Legitimate 81 Relationship to adoptive parents (nuptial) Natural parents 73 Relatives 2 Unrelated 6 Relationship to adoptive parents (ex-nuptial) Natural parents 73 Unrelated 222	Child's status prior to adoption Ex-nuptial 53 Legitimate 68 Relationship to adoptive parents (nuptial) Natural parents 62 Relatives 5 Unrelated 1 Relationship to adoptive parents (ex-nuptial) Natural parents 26 Relatives 1 Unrelated 26
1978	417	311	106
		Child's status prior to adoption Ex-nuptial 246 Legitimate 65 Relationship to adoptive parents (nuptial) Natural parents 57 Relatives 2 Unrelated 6 Relationship to adoptive parents (ex-nuptial) Natural parents 58 Relatives 5 Unrelated 183	Child's status prior to adoption Ex-nuptial 42 Legitimate 64 Relationship to adoptive parents (nuptial) Natural parents 63 Relatives 1 Relationship to adoptive parents (ex-nuptial) Natural parents 12 Relatives 5 Unrelated 25
1979	380	304	76

Financial year ending	Total adoption orders	Adoption orders (Department)	Adoption orders (private)
		Relationship to adoptive parents Related 161 Unrelated 143	Relationship to adoptive parents Related 23 Unrelated 53
1980	357	278	79
		Relationship to adoptive parents Related 134 Unrelated 144	Relationship to adoptive parents Related 22 Unrelated 57
1981*	281	208	73
		Relationship to adoptive parents Related 102 Unrelated 106	Relationship to adoptive parents Related 12 Unrelated 61
1982*	236	156	80
		Relationship to adoptive parents Related 93 Unrelated 63	Relationship to adoptive parents Related 6 Unrelated 74
1983*	235	146	89
		Relationship to adoptive parents Related 91 Unrelated 55	Relationship to adoptive parents Related 10 Unrelated 79
1984*	198	99	99
		Relationship to adoptive parents Related 51 Unrelated 48	Relationship to adoptive parents Related 12 Unrelated 87

* Excludes international adoptions, 'Special Children' and foster children

[Source: Annual Reports of the Child Welfare Department and Department for Community Welfare]

APPENDIX 5

RELEVANT ANNUAL REPORTS EXTRACTS FOR THE CHILD WELFARE DEPARTMENT AND DEPARTMENT FOR COMMUNITY WELFARE 1940–1980

Annual Report for financial year/s	
1939–41	"Although not a normal function of the Department, most of the legal adoptions arranged in Western Australia seem to be handled by the Child Welfare Department." "Unmarried mothers There are two homes which specially cater for the unmarried mother, the Alexandra Home, Perth (un-denominational) and the "Hillcrest" Maternity Home, North Fremantle, (Salvation Army). Usually Alexandra Home cases are sent to the King Edward Memorial Hospital for the accouchment, returning after the usual fourteen days. The "Hillcrest" Home has a special section for unmarried mothers. The Department assists these cases in various ways. If they go to either of the above-mentioned Homes and are destitute the Department pays for them whilst there. Afterwards, if necessary, monetary assistance is available for them. Where required and the child is suitable and otherwise eligible legal adoption is arranged. Legal assistance is given to enable action to be taken against the putative father, if there is sufficient evidence against him. Even where there is no evidence he is communicated with a view to a maintenance order being made against him. All these cases are given sympathetic help and advice. Most of the cases do not come back with a second child."
1941–46	"The Department has been unable to provide all prospective adopting parents with children for legal adoption. Prior to the war it had to advertise children available for adoption, but during the war and since the number of people wanting children has increased to such an extent that at the present time there are over 150 applicants waiting to adopt children."
1946–47	"The bulk of all adoptions granted in this State is arranged by this Department." "The Department deals with many applications for the adoption of children by relatives, where the adoption is considered to be in the best interests of the child. These are principally cases where a single woman marries and it is desired that her ex-nuptial child should take the name of her husband. Others are grandparents adopting their single daughter's child. Sometimes a widower allows his child to be adopted by a near relative. There are also cases of adoption of children of the wife's first marriage, by the mother and her second husband. These are arranged when it is considered desirable and that the child will benefit." "Applicants to adopt children still considerably outnumber the children becoming available, and whilst the Department is very thankful that there are so many home available for children, it is necessary to eliminate some. Preference is therefore given to those who are unable to have children of their own, and they are required to produce a medical certificate to this effect."

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	"A very important development in adoptions took place during the year. An Act, called the "Adoption of Children Amendment Act, No. 31 of 1945", provided that the Minister for Child Welfare in this State may make arrangements with the Minister administering any law relating to the adoption of children in any other State or Territory of the Commonwealth of Australia whereby adoptions granted in Western Australia of children born in other States may be registered in the other states. Furthermore, adoptions granted in other States of children born here can also be registered in this state. It is now possible to obtain a Birth Certificate for a child who has been legally adopted in the name of the adopting parents, irrespective of which State he was born in or which State granted the adoption. Most children adopted are illegitimate, and the granting of an adoption confers the right to a legitimate Birth Certificate upon them. This benefit was not available in the cases of children adopted in a State other than the State in which they were born until the agreements between the Ministers were completed and it will therefore be seen how important this legislation was to those children." "Unmarried Mothers: the Department is of great assistance to these cases, firstly, by maintaining them in suitable homes, if circumstances warrant it, and secondly, by giving legal assistance (free of charge) towards obtaining Court Orders, wherever possible, against the putative fathers." "Unmarried mothers and expectant single mothers are now receiving Unemployment and Sickness Benefits from the Commonwealth Government for six weeks before confinement and six weeks after. This, with the increased Baby Bonus, has eased their financial position a little and made them feel less dependent."
1947–51	"Unmarried mothers are given every possible assistance. They can be maintained in a Home before and after confinement; are given legal assistance, where possible, in obtaining affiliation orders in the Children's Court and are helped with fostering fees if they cannot undertake the whole responsibility themselves." "The Department is instrumental in arranging the legal adoption of children. Orders of adoption are granted by the Judges of the Supreme Court and the applications are handled either by this Department or by solicitors. Applicants to adopt children through the Department are visited by its officers, who report on the home circumstances and suitability of the people for the information of the Judges. Children made available for adoption are examined by doctors to determine their physical fitness, blood tests are taken and their hereditary backgrounds studied before they are placed with applicants. Finally, the legal papers are drawn up and lodged in the Supreme Court to await the Judge's decision Following the granting of the order, all necessary procedure is followed to re-register the child's birth in the name of the adopting parents and a birth certificate in the new name is obtained for them."
1951–52	"For the past ten years the number of applicants desiring to adopt a child has far exceeded the babies available. There does not appear to be a conclusive solution regarding the shortage of adoptable babies. Years before the war, when the number of babies available for adoption far exceeded the number of applicants desiring to adopt a babe, there was more of a choice. Three to four weeks is about the age a babe is generally adopted and it is very rarely an older child is available for adoption.

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	Applicants prefer to adopt a babe as young as possible and baby girls and in great demand."
1953–54	"The careful placement of young children with selected married couples who have taken the little ones with a view to adoption has given excellent results over the years. Wherever possible the Department endeavours to arrange adoptions, or to have children accepted into the homes of near relatives. Although the Adoption of Children Act 1896-1953 is not administered by this Department, a large proportion of legal adoptions are arranged by its officers." "In all cases children available for adoption to other than near relatives are subject to a strict medical examination. Where the parentage is at all doubtful and the health of the child in question, legal adoption is not considered by the Department. In such cases, if the mother is agreeable, the child is placed with foster-parents." "Most of the adoptions are arranged when a babe is four to five weeks old. Should an older child be available then arrangements are made for approved applicants to take the child for a probationary period during which term the Adoptions Inspector makes periodical visits to the home and reports on the progress and care of the child."
1954–55	"There are still very few babies becoming available for adoption. Approved applicants have to wait three years for a first child and about five years for a second child".
1956–57	"Financial help to deserving organisations. Certain privately organised charitable organisations devote themselves to work closely allied to the Child Welfare Department. The Alexandra Home for unmarried mothers welcomes and protects many girls who are the concern of the department. Very many of the babies born to those girls are placed in adoption through the Department. That Home is also the training school for Mother-craft Nurses in this State. In the year here reviewed the Government has assured the Committee of the Home of an amount of £100,000. Towards the erection of a new and enlarged Home, in which unmarried mothers and their babies will be cared for and in which both Infant Health as well as Mothercraft nurses will be trained. That new Home will also care for defective infants and children up to 3 years of age, who are in the care of the Child Welfare Department. The Salvation Army's Hillcrest Maternity Hospital accepts private patients and also cares for unmarried mothers. A sum of £42,000. Has been made available for the expansion and modernisation of that Hospital … " "There are still very few babies becoming available for adoption and the number of applicants desiring a baby or older child to be placed with them for adoption is still increasing." "…while the total number of Orders [for adoption] have has doubled in 17 years the number arranged by Solicitors has multiplied twentyfold, while the number arranged by the Department has been more than halved. The fact is that a married couple wishing to adopt a child will find a suitable infant very much more rapidly through their contacts with lawyers, members of the medical

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	profession, nurses and doctors, than they will by applying to the Child Welfare Department. The applicants approved by the Department will in general have to wait three years before their turn for a child comes. This long wait prevents many persons approaching the Department and causes a certain number of departmental applicants to withdraw their request. In the interests of the children concerned it is desirable that adoptions be arranged through the Department so that the homes to which children go can be inspected and approved by some impartial authority accustomed to the social assessment of homes and families. It seems desirable to contemplate some method by which all prospective adoptions should be scrutinised by the Child Welfare Department."
1959–60	"There are still very few babies becoming available for adoption, and the number of applicants desiring a baby or older child to be placed with them for adoption is still increasing." "During the year 78 applications were withdrawn and of these 46 applicants adopted a child privately …" "The Alexandra Home Women ceased to exist and was replaced by Ngal-a Mothercraft Home and Training Centre at South Perth. It now provides for the receipt of children under three years of age, who were previously initially placed in the Child Welfare Reception Home, in addition to being a Home for unmarried mothers and a mothercraft training centre"
1960–61	"The preparation of the Welfare & Maintenance Bill, which will be presented to Parliament at the present Session. This Bill empowers the Minister for Child Welfare to make grants towards the welfare of persons in distress and to recover certain of those payments from those legally responsible for the upkeep of deserted wives and children and of illegitimate children." "On the 25th November, 1959, the Adoption of Children Act was amended:- (1) It is now compulsory that the applicant or applicants, for the adoption of a child shall, within a period of 6 months immediately preceding the date of the application, undergo an X-ray examination of the chest … (2) A responsible officer of the Child Welfare Department of this State must make a written report to the Honourable Judge as to:- (a) Whether the applicants are of good repute, fit and proper persons to have the care and custody of a child and have the ability to bring up, maintain and educate a child. (b) Such other matters concerning the applicant or the child as the Judge determines."
1962–63	"During the year 176 applications were withdrawn and of these 94 applicants adopted a child privately."
1967–68	"The trend in recent years has been for the numbers of children becoming available for adoption to exceed the number of applicants seeking to adopt a child. This trend

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	has continued during the past year. In this situation a number of very young children can be left without effective guardianship pending adoption. However, amendments to the Adoption of Children Act, 1896-1962, to be proclaimed during the year, will secure status and guardianship for these children, until adoption is finalised, by making them wards upon the natural mother consenting to place the child for adoption. Other provisions will make it necessary for people seeking to adopt a child to be approved by the Director prior to a child being placed with them."
1968–69	"Under amendments to the Adoption of Children Act, and Supreme Court Rules being prepared, the Department's involvement in adoption matters will be extended and a number of inadequacies in the present legislation will be overcome. In the next year, the Department will be faced with pressures resulting from an increasing number of adoptions to be handled, as well as reorganisation of its service to accommodate the significant changes contained in the legislation due for proclamation. Major new responsibilities that will be undertaken by the Department will be in the assuming of guardianship by the Director of all children offered for adoption and in investigating, for approval, all adoptive applicants before placement of children is made." "Reorganisation of the Adoption Section of the Department has commenced and casework facilities available to clients are being strengthened and co-ordinated with the creation of a position of a Social Work Supervisor and appointments of additional Social Workers as they become available." The Child Welfare (Care Centre) Regulations became effective 15th July, 1968. These regulations prescribe the physical requirements of Child Minding Centres, the numbers and ages of the children catered for, the numbers and qualification of staff, the equipment and programme requirements and the records to be maintained. At the end of the first year of the operation of these regulations, the number and details of the Centres for which licences have been issued are – 18 Day Care Centres with total capacity of 457 children. 9 Family Care Centres with total capacity of 44 children. 2 Occasional Care Centres with total capacity of 120 children. 26 Centres were operated by private individuals and 3 were operated by organisations or associations. These regulations set very good standards in this growing area of the care of young children who must be left by their parents in the care of others."
1969–70	"New Developments in Adoption of Children: In the matter of adoption of children significant changes in the Adoption of Children Act have brought added responsibility to the Department. Reorganisation of the Adoptions Section has been undertaken and completed, to cope with the additional work expected. The section has been expanded and now integrates all aspects of the work; legal, clerical and casework under super vision of a Social Work Supervisor (Adoptions). Four trained Social Workers and two family Welfare Officers are

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	employed to extend and strengthen casework services in this highly responsible area of Child Welfare practice." Adoption of Children Act: "On 1st May, 1970, a number of major changes to the Adoption of Children Act and Regulations became effective. The most significant of these amendments concerned: *1. Consents to Adoption* A Judge shall not now make an order for adoption unless consent to the adoption has been given by the appropriate person or persons. Consents if signed within 7 days of confinement are not valid unless a legally qualified medical practitioner or midwife certifies that the mother was in a fit condition to give such consent. Consents signed before the birth of the child, or obtained by fraud or duress, or altered without authority, or given by a person who does not understand its nature are defective. Valid consent, once given, and not revoked within 30 days becomes irrevocable. *2. Prior approval for Adoptive Parents* Persons wishing to adopt a child must obtain the written prior approval of the Director of Child Welfare in all cases. *3. Transfer of a Child for Adoption* It is now an offence to transfer without the written permission of the Director, the possession, custody or control of a child with a view to having the child adopted. *4. Guardianship of Children Offered for Adoption* The Director now automatically becomes the guardian of every child, for whom a consent for adoption has been signed, pending an adoption order being granted, the consent being revoked, or a Judge of the Supreme Court making some other order in respect of that child. With these amendments, a number of defects in the earlier legislation have been overcome."
1970–71	"On the legal side, the number of departmentally sponsored Adoption Orders granted dropped sharply in contrast to figures for previous years. This decline is due largely to the new Adoption of Children Act which came into effect in May, 1970, and which required considerably more information to be presented to the court with each application. The extra work demands, almost double, of the new Act slowed Adoption Order work during the whole of the year. Adoption Orders for six part-native children and six State Wards were secured by the Department this last year. Some babies are not immediately available for adoption for legal reasons or because further medical investigation is indicated. To avoid the detrimental effects of such babies remaining too long in hospital the Department this year began a temporary foster mother scheme which enables babies to be cared for within a normal family setting while awaiting final adoption placement."
1971–72	"The end of the year under review constituted another milestone in the history of Governmental welfare within this State. This Department, known as the Child Welfare Department for 38 years, ceased to operate in this exclusive capacity as at the 30th

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	June, 1972 and has since assumed a more comprehensive role as the Department for Community Welfare." "Contrary to the trend over previous years, the number of babies made available for adoption decreased this year. A total of 448 babies were placed by the Department for the year. The main factor responsible for the decrease appears to be that many more unmarried mothers are now keeping their babies." "Orders granted by the Court to departmentally sponsored applications more than doubled, compared with the previous year. This was the effect of an increase of staff in the clerical section of the Branch."
1972–73	"A new chapter in the history of social welfare in Western Australia began with the creation of a Community Welfare Portfolio on 3rd March, 1971, when Mr. W. F. Willesee became the first Minister for Community Welfare. Work then began on the preparation of a Community Welfare Act and the organisational re-arrangements that were required and which primarily effected the former Native Welfare Department and the responsibilities carried by that Department. On 1st July, 1972, the Community Welfare Act came into force and the Department for Community Welfare was established. Certain of the welfare activities for Aborigines which had previously been undertaken by the Department of Native Welfare were incorporated with those of the Child Welfare Department, and these together with a number of new functions prescribed by the Government now define the field of activity for the new Department." "On 1st July, 1972, the amendments passed in 1971 together with the new Rules for the Adoption of Children Act came into operation. The amendments brought in several significant changes to the Department's responsibilities and procedures. The principal changes were:- (1) The addition of a new section which stated that the welfare and interests of the child should be regarded as the paramount consideration. (2) Emphasis was laid on the desirability of husband and wife jointly adopting a child, however some restrictions covering the making of orders in favour of one person only have been relaxed. (3) The Director's rights and responsibilities of guardianship were stated. Among the responsibilities was the requirement that the Director should provide, in writing, to the Court his opinion as to whether the applicants were proper persons to adopt a child. (4) The age of majority was reduced to 18 years of age and certain other amendments were made to age limitations to allow for much more flexibility in the operation of the Act. One effect of these amendments has been to simplify and reduce the amount of work required to prepare the documents for each application to Court. Applications are now prepared more rapidly and the period that clients have to wait to make application, after placement of a child for adoption, is being reduced." "The fall in the number of babies made available for adoption, mentioned in the Child Welfare Department report of 1972, has continued. This trend is evident all over

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	Australia and in many other countries. The reason for the decrease is that more unmarried mothers are keeping their children. The significant factor in this appears to be a change in the community's attitude towards the expectant and unmarried mother and, more importantly, the unmarried mother's own perception of her acceptance in the community." "The drop has caused a lengthening in the period of time applicants must wait to have a child placed with them. The Department now has many families waiting for a child and, if the present trend continues, it will become increasingly difficult for some families to adopt at all. Some of the Eastern States agencies have closed their adoption lists completely and they are expected to be closed for at least two years. In Western Australia we are not yet in such a desperate situation but, as the downward trend in the supply of babies has become evident and as the number of persons applying to adopt continues to rise in relation to the growth in population, this Department has introduced a set of criteria which must be met before applicants can be assessed for approval. These criteria relate to age, ability to have children, length of time applicants have been married, the number of children they have and the length of time they have been and intend to remain in Australia. One of the functions of the Branch has been to provide a counselling service for unmarried pregnant girls. The counselling aims to help the girl sort out her own feeling regarding her expected child and to provide information about the services available through the Department, and private agencies, so that she make an informed and realistic decision whether to place the child for adoption or whether to keep it. During the year, the Department in conjunction with King Edward Memorial Hospital and their visiting geneticist, Dr. Hockey, standardised interviewing techniques and the assessment of mothers in order to obtain a more complete genetic background of babies subsequently made available for adoption. During the year the Branch decided that, as a matter of policy, strenuous attempts should be made to contact all putative fathers. It is too early to give definite figures on the success rate but the results so far have been reasonably good . Putative fathers have also been asked to co-operate in supplying genetic information. The temporary foster scheme which was introduced in 1971 to provide better care for babies awaiting placement for adoption is still in operation and is proving to be a valuable contribution to the Branch's efforts. The Branch can see clearly some areas in which it can improve its services and increase its efficiency. Next year it is hoped to introduce new techniques in the assessment of adopting parents through group sessions. It needs to develop an after-placement service for adoptive parents who require help. There is a lack of early contact and knowledge and specialised after-care services for those unmarried mothers who decide to keep their babies. New approaches will be needed to attract more applicants, including Aboriginal parents for children of Aboriginal descent." "The functions of the Adoptions Branch are becoming more complex and it is becoming increasingly necessary for us to seek information from specialists in other disciplines. Over the year we have received particular help and medical advice from Professor McDonald and the Medical Board at Princess Margaret Hospital, Professor Kakulas of Royal Perth Hospital and Dr. Newnham of the Public Health Department."

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1973–74	"The fall in the number of babies made available for adoption, mentioned in the Community Welfare Annual Report of 1973 has continued. This trend is evident throughout Australia and in many other Western Countries. The reason for the continued decrease is that more and more unmarried mothers are keeping their children. The most significant factor appears to be a change in the community's attitude towards the expectant and unmarried mother and more importantly, the unmarried mother's own perception of her acceptance in the community. The number of babies placed for adoption by the department climbed to a peak in 1970/71 when 492 babies were placed. In 1971/72 the number dropped to 448 and in 1972/73 to 342. In the year 1973/74 the number of babies placed dropped by a further 100 to 242. As a consequence many families are waiting to adopt children and if the trend continues we may introduce more stringent selection criteria or perhaps cease to register the names of prospective adopters as some Eastern States have done … Applicants who take difficult-to-place children are not subject to the normal criteria but are carefully assessed for motivation. The Department also gave permission for 60 children to be placed for adoption by hospitals and doctors. This number is also a considerable reduction from the numbers placed the previous year." "As at 30th June 1974, there were approximately 300 families who ad applied to the Department for a child for adoption awaiting assessment. Most are not seen for their first interviews until approximately 9 months from the date of their original application. This delay is likely to become longer. Adoption staff are very aware of the anxiety caused to applicants at this time and every effort is made to explain to them the reasons for the procedure being introduced. The branch has introduced this waiting period prior to investigation and assessment primarily to have a more up to date assessment when a suitable child for adoption becomes available, and to reduce the number of reassessments necessary, as the Department's policy is to have adoptive families assessed within 6 months of placement of a child. It has been found that during the waiting period a number of applicants withdraw because of changed circumstances, marital disharmony and pregnancy even in those medically certified as unlikely to conceive." "The number of adoption orders granted to applications sponsored by the Department during 1973/74 was 43 more than the previous year and almost double that of 1971/72." "On 1st March 1974, amendments to the Adoption of Children Act, passed in November 1973 were put into effect. The amendments had the effect of strengthening the protection the Act provides in 3 areas to the parties involved in adoption processes. The amendments: 1. Closed a loophole, relating to consents to adopt, in the legislation which in some rare cases placed in jeopardy the prospective Adoptors' right to the child which was placed with them for adoption. 2. Extended the restriction on the publication of the identity of parties involved in the adoption processes.

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	3. Removed the provision which made an investigation by the department necessary whenever a parent of the child wished to adopt the child into the marriage. Since 1970, adoption applications concerning children related to either or both of the applicants, which were previously prepared by the Department have been handled by private solicitors. This was due to the rapid increase in the number of children who were being placed by the Department, and, more importantly, to the lack of staff necessary to cope with the work. It now seems that many of these people are unable to afford the fees charged by solicitors and consequently have been applying to the Crown Law Department to have their child known by the same name as other members of their family. This method does not give the child the same status within the marriage as would be the case if they were legally adopted. During the last year there have been many requests for the Department to undertake adoptions of this type, however this will not be possible until the difficulties of the department caused by lack of staff are overcome. It has been estimated that there are many thousands of ex-nuptial children who have not as yet been legally adopted or legitimated. This type of application is not now normally subjected to investigation and assessment by the department's offices as is the case with the more routine type of adoption. In order to improve and standardise assessment procedures the responsibility for the investigation and assessment of adoptive families applying to hospitals and doctors for their child, in the metropolitan area, was transferred from the officers in the Field Division to Adoptions Branch officers, experienced in adoption procedure. This has led to an increase in the volume of work for the adoptions staff. The temporary foster care scheme which was introduced in 1971 as a means of providing home rather than hospital care for babies awaiting placement for adoption is still in operation and continues to be a most valuable service." "The establishment of the Child Placement Service and the Child Placement Committee has been of direct interest to the Branch, and the voluntary participation of Adoptions Supervisor and staff on the committee has proved very valuable to Adoptions, in that it has highlighted areas of concern shared by adoptions and fostering staff, and has led to considerable co-operation between the two groups. The adoption of Aboriginal children by Aboriginals has also received considerable attention and has far reaching implications relating to the values and attitudes of our culture reflected in our assessment processes that should be applied when assessing aboriginal families." "The functions of the Adoptions Branch are becoming more complex and it is becoming increasingly necessary for us to seek information from specialists in other disciplines."
1974–75	"*Departmental Adoptions*: In the year ended June 1974 a record number of 581 adoption orders were granted because an all-out effort was made by Field and Affidavits staff to clear the backlog of Court reports and Applications to Court for orders." "The Resumption of Certain Type of Applications Performed by Solicitors Since 1970:

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	In 1970, owing to pressure of work resulting from accumulated Hon Judge reports by Field Officers and Applicants for Orders by Affidavits Officers, it was decided to suspend processing applications for children of a previous marriage to be adopted into a new marriage, and for children of a pre-nuptial or ex-nuptial association to be adopted into a marriage. All such applicants were therefore referred to private solicitors. The public frequently requested the resumption of this service by us and we considered it was a justifiable expectation, but that if, and when, we were able to do so the option should remain for applicants to use private solicitors. Early in 1975 the public were advised of the resumption of applications for all children of a previous marriage and a limited number of applications concerning children of ex-nuptial associations. It is anticipated that all applications of children of ex-nuptial associations will be resumed in October 1975. The resumption of these cases will now ensure that all applicants requiring a social work service will be brought to the attention of the Supervisor by the Affidavits Clerk, who will interview applicants In the first instance if they live in the metropolitan area. Those who live in country areas may exercise the1r option to come to Adoptions or to receive service from their District Officers. Wherever an Affidavits Clerk considers that a client requires social work assistance he will be referred to the Supervisor. In addition, all applicants are being given a written memo by the Affidavits Clerk advising them of the availability of a social worker should they wish to discuss private matters or problems." *Non-Departmental Adoptions*: The Adoptions Centre is now fully responsible for the assessment of all non-Departmental applicants in the metropolitan area." "Medical Panel: An event of considerable significance for the Adoptions Centre has been the establishment of a panel of four honorary medical consultants. This has improved assessment of the medical and related social problems of both applicants and children and improved placement procedures." "Partly as the result of the sharp decline in the number of babies available locally over the past three years, and partly as the result of the recent events in Vietnam and increased awareness of the availability of children in some South-east Asian countries, there is now considerable demand from the public for the adoption of foreign children. Australian citizens approved in various States have been travelling to countries such as Thailand and Sri Lanka to adopt children. This practice has been fairly common for some time in countries such as the United States and Sweden where social trends often evidence themselves earlier than in Australia, and where there is an even more acute shortage of children than in this country. In Western Australia there is no provision for the licensing of private adoption agencies and therefore there are none. The Adoptions Centre of the Department is solely responsible for the assessment of adoptive applicants. The local Branch of the Australian Society for Intercountry Aid (Children) neither approves applicants nor has the authority to obtain them and bring them into this State from foreign countries." "It would be conservative to settle for a percentage figure of "real" supply to demand of 22% to 25% for the year 1975/76.

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	There is a drastic need for the application of further limiting criteria in the coming year 1975/76 on all applicants."
1975–76	"One of the major developments in the sphere of Adoption in 1975 was the necessity to introduce new criteria in relation to the eligibility for approval and assessment to adopt a child." "From the figures available at present it would appear that there has been a significant decrease in the number of applications as the result of the imposition of our criteria since October 1975. Nevertheless, the day may not be far off, when we have to make the decision whether some applicants may have no children at all and some applicants may have two, or whether all applicants within certain criteria should have one only. Whatever we do decide it will be essential to keep our books open, even with these restrictions, than to close them temporarily as this could cause blackmarketing in babies and would also be unfair to those whose legitimate place in the queue would never be verifiable once we re-opened our doors." "First Australian Conference on Adoption: "The Conference made several important recommendations including the formation of a national steering committee on adoption with the responsibility of drawing up standards of adoption practice in Australia." "The Department's Adoptions Centre has an Honorary Adoptions Consultative Medical Panel which is unique in Australia. This panel, now in its second year, has improved the standard of assessment in relation to medical problems of both applicants and children and has therefore improved placement procedure." "It can be seen that even if the number of babies available remains constant the relative percentage of supply to demand would be approximately 24 per cent in the forthcoming 12 months. It is likely however that the number of babies ava il able will continue to decline. Consideration will therefore need to be given to the possibility of further restricting the criteria or allowing a further increase in the waiting period of the applicants to result." "Due to the Family Law Court taking over the making of Adoption Orders from the Supreme Court towards the end of the year there were numbers of papers which had been filed during 1975-76 and for which Orders were subsequently made shortly after 30th June 1976." "There has been a considerable increase in the number of Orders made concerning previous marriage and ex-nuptial children adopted into a marriage. This is a result of the department deciding upon the full resumption of these cases as from the 1st October 1975."
1976–77	"Decision making processes during the year were changed to allow greater participation in important decisions within the Branch. A notable development has been the establishment of the Adoptions Application Committee consisting of the Assistant Director (Welfare), Chief of Welfare Services, Chief Clinical Psychologist and the Senior Supervisor Adoptions. This Committee meets when necessary to discuss

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	cases of an unusual or special nature. This Committee commenced in August 1976 and had considered 24 cases during the year." "The Medical Advisory Panel has continued to be invaluable as a consultative body on cases where medical factors require specialist advice. Not only has this panel assisted the Department on an individual case basis but also on socio-medical matters relevant to adoption. We thank the members of the Panel for their important contribution during the year." "One of the areas which requires comment relates to the consistent demands placed on the Branch as a result of an under-supply of babies and an excessive number of applicants. The figures supplied for applicants awaiting children grossly understates the number of applicants who would take children if they were available. Complaints in relation to eligibility criteria have been made, and it is likely that these will continue as waiting lists increase in length and the diminishing number of babies means that many more applicants must go unsatisfied." "No adjustment to the criteria was made recently, however this aspect will need to be closely watched in order to maintain a "hopeful" state of affairs for those who are suitable applicants. As mentioned above, there was a further noticeable reduction in the number of babies made available for adoption, and a similar proportionate reduction in the number of applicants compared with the previous year. We believe there were fewer applicants applying due to the continued effects of limiting selection criteria as well as the extensive waiting period being unacceptable to many. Although there was a reduction in the number of adoption orders made for unrelated children, the handling of ex-nuptial cases and previous marriage arrangements have almost doubled. It is considered that this is possibly due to an increase in the divorce rate and subsequent marriages as well as greater knowledge by the community of the service available at the centre." "During the year consideration of Adoption Applications and granting of Orders was transferred from the Supreme Court to the Family Court." "On the 14 June changes to adoption legislation were proclaimed. The Amendments removed all references to illegitimacy from the previous legislation. The phrase "an illegitimate person" was deleted and replaced by "a person whose parents were not married to each other at the time of his birth or subsequently". This was particularly appropriate because it excluded children who have been legitimated by the subsequent marriage of the parents and it emphasises the condition of the parents rather placing a stigma on the child. Concern was expressed that parents of children who marry or re-marry and wish their children to be adopted into their new family, have to adopt the children jointly with their new spouse. Amendments provided that in circumstances of this kind the new spouse alone would be able to make the application for adoption. This should reduce complaints by people who in the past had to adopt their own child. Under the provisions of the Adoption of Children Act it was possible for a person to consent to adoption in favour of a relative and when such a consent had been given it was only valid if the child was placed with that relative for adoption. Amendments

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	provided that the unmarried mother of a child who wishes to nominate the father as the person by whom the child must be adopted, should be able to do so. Previously the term "relative" included the child's grandparents, brothers, sisters, aunts or uncles, but did not include the father unless the parents were married." "An amendment was also included for it to be an offence to use undue influence to induce a person to revoke an adoption consent as well as it being an offence to receive the possession, custody and control of a child for the purpose of adoption without the consent of the Director. The issue of the rights of the adopted child to contact natural parents and related issues has been the subject of debate overseas and in the Eastern States. Increasingly this issue is being commented on in this State and there have been a number of enquiries to the Branch from adopted persons wishing to obtain information on their background. The Branch prepared a substantial paper on this issue during the year for the development of future policy in this area."
1977–78	"The trend of past years in the area of adopting an unrelated child has continued in that there has been further reduction in both the number of children available for adoption and the number of applications to adopt. A total of 158 children were placed for adoption in 1977/ 78 and there were 228 applicants. This includes departmental and non-departmental figures. The imbalance between supply and demand continues to add to the backlog of existing applicants from previous years and there is now an approximate waiting time of between 3-31- years between application to adopt and the placement of a child. The adoption of ex-nuptial and previous marriage children continues to be popular. It had been expected that greater use would have been made of the Amendment to the Adoptions Act 1976 which allowed a new spouse alone to adopt his partner's ex-nuptial/former marriage child. This has not eventuated. Similarly there has, as yet, been no occasion to use a newly created section of the Child Welfare Act 1977 which provides for ministerial committal of a child for whom the consent to adoption of one parent is available but where consent of the other parent cannot be obtained. The child, under this section of the Act, may be committed until the second consent is obtained or dispensed with by the Family Court. Over the past year discussions with King Edward Memorial Hospital have resulted in some changes in the use made of their facilities. Some babies for adoption are now moved more quickly from the hospital and placed with temporary foster families or in Ngal-a. This has taxed our temporary foster facilities to the extent that currently we are looking to engage more temporary foster parents for pre-adoptive children. An active recruitment programme will be necessary."
1978–79	"A History of the Department for Community Welfare" "The adoption figures for 1978/79 continue to reflect the trend of previous years, i.e. a slightly increased number of applications for adoption and a significantly decreased number of children available for adoption." "Over the past year the Adoption Centre has mounted an extra effort to place "special" children as quickly as possible. The term "special" refers to that small number of babies or children for whom parents have to be sought who are capable of meeting the special and known needs (mental, physical or social) of the child. These efforts

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	have resulted in the placement of six such children with parents of whom the Centre is particularly proud." "Dispensation of parental consent to adoption has been sought and granted by the Family Court in three cases on behalf of children in long term foster care. While dispensation of parental consent is neither lightly sought nor lightly granted, it is envisaged that more such applications will be made in the future in appropriate cases. The adoption of ex-nuptial children and children of previous marriage into a subsequent marriage, continues to be an increasing area of adoption work. While the Director may, in this type of adoption, exercise an option not to report to the Court, an important principle of the Adoption of Children Act ie. "for all purposes of this Act, the welfare and interest of the child shall be regarded as the paramount consideration" is as applicable to these adoptions as it is to any other type of adoption. Over the past year therefore, more such applications than previously are receiving attention by the social work staff."
1979–80	"Applications for local adoption continue to exceed the number of babies made available for adoption. This situation understandably causes long delays in the adoption process and has prompted many approved applicants to express interest in adopting a child from another country. Since 1975, 65 overseas children have been placed in Western Australia. With the number of locally born children available for adoption likely to remain well below the level of demand, more and more childless couples may eventually seek to adopt a foreign child." "A feature of adoption for many years has been the imbalance between the number of locally born babies available for adoption and the number of persons wanting to adopt them. Again this year the imbalance has been evident, although less noticeable than last year. During the year the Adoption Centre placed 108 babies for adoption while the private sector placed 12. The imbalance between supply and demand of previous years continues to add to the backlog of applications. The waiting time between the date of application to the Adoption Centre and placement of a child is now approximately four years. The Adoption Centre is being more frequently alerted to attempts to obtain children illegally. Fortunately the warnings, usually from the general public, are in most cases made in sufficient time for the Centre to intervene and warn against the proposed action. Section 23 of the Adoption of Children Act 1977 deals with this matter." "This year saw the beginning of a special effort towards adoption on behalf of selected foster children. Adoption Orders have been granted for nine such children during the year. In addition 13 'special' children were placed for adoption. Special children are those for whom parents have to be sought who are capable of meeting special and known needs of these children. Some few years ago such children were likely to have been placed in a 'foster view adoption' situation with its attendant uncertainty, if indeed, adoption were considered for them at all." "Future Trends: In adoption matters in Australia, the 1960's were the decade of 'uniform' legislation; the 1970's were the decade of intercountry adoption; and hopefully the 1980's will be the decade of evaluation.

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	Changes can be predicted for the future in the very nature of adoption, as various growing factors have their effect, e.g. the growing pressure of some groups to emphasize the rights of adoptees and original parents. Intercountry adoption will have its own impact on questions of access to original birth certificate details, coping with personal identity crises, and consideration of the rights of all parties to an adoption. What is needed is an examination of intercountry adoption policy and practice to ensure with greater certainty that 'the welfare and interests of the child shall be the paramount consideration'."

APPENDIX 6

WA GOVERNMENT INFORMATION ON ILLEGITIMACY 1972[2152]

MASTER

Illegitimacy

PUBLISHED BY THE HEALTH EDUCATION

H E R

DEPT. OF W.A. FEB 1972

UNMARRIED PARENTHOOD

Neither the Pill nor sex education to the young have made much difference to the increasing number of Australian children born out of wedlock.

The attitude of society to such children has become much more humane in recent years.

Common comments from disinterested people are:

"It should be the parents who are considered illegitimate, not the innocent child" and "it's the good girl who has the baby. The bad girls are much too shrewd."

They are only comments.

The fact remains that a child is better off when born with the right to have two parents who are married to each other and happy in their marriage and parenthood.

The law makes every effort to lessen the disadvantages of illegitimate birth.

Recent legislation has improved the lot of the child who is adopted.

But practically no girl expects to have an illegitimate child.

A girl who has been living with a man who does not want to marry may decide to become pregnant because she wants him to marry her. She cannot make him marry her. She may have an illegitimate baby.

The man may be already married. He cannot marry the mother of his expected child, which is illegitimate.

Practically no family thinks of an unmarried daughter becoming pregnant, much less do they know the law in such circumstances.

Nowadays there are more parents to whom their daughter's need is more important than their feeling of shame.

But there are still unmarried girls and women who face motherhood in ignorance complicated by loneliness. They either will not or cannot tell their parents. Maybe they have none. Often they take leave from their jobs and go to another state to get over the confinement.

Every country in the world has different legal set-ups and welfare positions for unmarried mothers.

WHAT TO DO?

As with all pregnancies, the first and most important step is to see a doctor and get his advice. A baby is handicapped enough without a health handicap. This is of special importance if the child is to be adopted. His help usually includes arranging for her confinement at the most convenient hospital.

If from the onset she decides that she wants her child to be adopted; if the girl lives in a country town and is to be confined there, either the doctor, the matron or the girl herself will get in touch with the Child Welfare Department.

If there is a Child Welfare Department office in the town, this contact will be made to the district officer. If not, a letter will be written to the Child Welfare Department in Perth, and arrangements made.

There are a number of officers of the Adoptions Sections and the expectant mother is allocated to the officer in whose area is the hospital in which she will be confined.

If it is arranged for her to go to a lying-in hospital (N'Gala or Hillcrest), she makes the arrangements with the matron herself. An officer of Child Welfare Department Adoptions visits her at the hospital.

If she attends the King Edward Memorial Antenatal Clinic, she is referred to the hospital social worker who arranges for her to visit the Adoptions Section at 45 Havelock Street, West Perth. If her confinement is to take place at a smaller metropolitan hospital she can ring the Adoptions Section (22-1811) and make an appointment, having said at which hospital she expects to be confined.

Keep him? . . . Have him adopted? Of about 2,000 unmarried mothers who face these questions in this State each year, many like the schoolgirl in the picture (posed) are children themselves. Yet the unmarried mother must make the decision herself without pressure from her parents.

The number of illegitimate babies is increasing in Australia (in England it is significantly on the decline), but so is the number of girls who decide against making the baby available for adoption. A schoolgirl posed with a borrowed baby for Ken Hotchkin's photograph, but it can still tug at the heartstrings.

[2152] Health Education Department of WA, February 1972, in Submission 59.

The Adoptions Section of the Child Welfare Department stresses that it is the responsibility of the expectant mother to contact the Child Welfare Department or to check that her parents or doctor have done so.

Too many girls get no pre-confinement counselling because nobody thinks to let the C.W.D. know early enough.

This is up to the girl herself, and more mature friends should tell her so.

ILLEGITIMACY

An unmarried girl has a baby. That is, an illegitimate child.

What is the position as regards the mother, the baby, the father, the law and the parents of the mother? Particularly when she is a young teenager, perhaps a schoolgirl.

We must leave all the emotional considerations aside and consider the facts.

An illegitimate child is one whose parents are not married to each other.

If the mother is a married woman and the father of the child is a man other than her husband, the child may not be regarded as illegitimate in law. It would be difficult to prove him so.

But the illegitimate child with whom most people are concerned nowadays is the carelessly conceived by-product of teenage sex.

WHAT IS THE CAUSE?

Girls and boys are maturing earlier, by three to four months in every ten years. So puberty is reached at an age of 2½-3½ years earlier than it was a century ago.

The age of the menarche, the girl's first menstrual period at which she achieves sexual maturity, is not fixed but varies according to a number of factors which range from race and heredity to the quality of nutrition. In a three-generation family it is useful to compare the ages of the onset of the menarche. Normally a granddaughter is likely to have her first period as much as a year earlier than her grandmother did.

Better living conditions over the last century at any rate appear to be the reason for earlier maturity.

That is, it is not that earlier maturity should be a continuing thing but become a fixed and normal thing under favourable conditions. If they continue, by the end of this century the trend to earlier maturity should have gone about as far as it can go. It should have settled down to a predictable figure but still varying from person to person according to genetic influences.

But as it is, girls are physically capable of motherhood much younger than when they are old enough to marry and set up a home.

Increasing freedom between the sexes and the "new morality" attitude to sexual experimenting are reasons often given for teenage pregnancies nowadays.

Many psychological writers agree in the theory that teenage girls who become pregnant are love-deprived in the family setting.

Dr. Derek Miller, an American educational psychologist in his book "the Age Between—Adolescents in a Disturbed Society" comments: "When unmarried girls become pregnant adults try to be helpful in a variety of ways. Sometimes an abortion is suggested. Although this may be socially convenient it often carries the implication to a girl that the important adults in her life do not see her as fit to be a woman. If lack of security about her feminine role is the emotional conflict that led her to getting pregnant in the first place, abortion increases one problem as it solves another.

"Pregnant girls are often sent away from school—partly because of society's anxiety that others will be tempted to follow in their footsteps, partly because of concern about the attitudes of other children's parents.

"But girls almost always know when one of them is being sexually active: there is little reason for removing a girl from school because she becomes pregnant. If the pregnancy of a girl is felt to be shameful then there would appear to be no alternative but to "hide her"; but the attitude of the young in these cases can be more mature that the attitudes of the older generation.

"When girls are unmarried and having a child they need emotional support and help from adults who care for them. Unfortunately they are often the victims of society's unconscious punitive attitudes."

Dr. Miller's experience is with American and English adolescents. Australia is only just thrashing out its attitudes to the termination of pregnancies, even in the case of rape victims. As a result the socially convenient abortion is no national solution.

In spite of the contraceptive Pill being freely advised for young girls who are sexually active there appears to be no decline in the number of young girls who give birth without marriage.

The majority whose social, educational and financial circumstances lead them to seek help from the Child Welfare Department are about 17, with the father of the baby about 19. Some are much younger, some older. Because of the number of childless couples anxious to have a child, and offering good homes, adoption is a generally accepted solution.

WHO "OWNS" THE BABY?

Parents of a schoolgirl daughter are her legal guardians. That being so, many parents think that if the daughter should give birth to an illegitimate child, her parents automatically become the legal guardians of the baby. That is not so. The mother is the legal guardian of her own baby.

If the baby is to be made available for adoption, it is the young mother who must sign the consent form.

If the girl's mother is unwilling to have her baby adopted, and the parents or anyone else pressure her to agree, this pressure is a breach of the law and they are liable to a stiff penalty.

Say they say "We will send you back to school and not reproach you now or ever again if you have the baby adopted" and she says "But it's my baby and I don't want to give him up never to see him again"?

This is a difficult situation from a number of viewpoints.

But what the Child Welfare Department sees as the most important thing in this matter is that pressure should be removed.

If the question of adoption is considered, the C.W.D. is always involved but the extent varies.

The department is always involved in the assessment of applicants—those wishing to adopt. But in some hospitals the staff and the doctors arrange their own placements and the Child Welfare Department never sees the girls.

The Department becomes involved when the girl is referred to it by the hospital or the doctor. There are no restrictions placed by maternity hospitals on admitting unmarried girls for childbirth but there are several hospitals which are specially co-operative and give counselling.

COUNSELLING

Whether with a social worker at the hospital or Child Welfare Department, counselling is most necessary so all facts about adoption must be presented to the young mother for consideration. For she is to be called upon to make a most important and mature decision. In the case of a very young mother, it is her first adult decision if she is to give up her baby for adoption.

She has alternatives.

(1) She may want the baby to be adopted.

(2) She may want to keep the baby.

ADOPTION

(1) If the mother prefers to have the baby adopted, the Child Welfare Department's attitude is that the decision must be hers alone and the Department does not want to persuade her either way but is anxious to ensure that all the facts are made known to her. It is the department's function to help her if she asks for help.

HANDICAPPED BABIES

Children who are born with severe handicaps which make them unsuitable for adoption may be fostered.

The Child Welfare Department and the parent(s) can request the Minister for Child Welfare to commit the child to the care of the department, in which case the parent(s) must agree to contribute, if asked, to the child's maintenance.

If the mother, having left the hospital a few days after the child's birth, merely abandons it, the Child Welfare Department goes to the Children's Court where an application is made to have the child declared destitute, in which case the mother, and father if known, may be required to agree to contribute to the child's maintenance.

MONEY MATTERS

Both in the case of the baby made available for adoption and when the mother decides to keep her baby, expense plays a large part.

There is an increase in the number of girls who keep their babies, but financial pressure is one of the big influences on the decision.

Here again, the counselling she has had makes her aware of what she faces at a time when she has bills coming in. She may want to go back to school or back to her job. Her parents may not want a daughter who is an unwed mother in their home. A surprising number do. Some mothers look after the baby while the young mother goes to work. Some parents apply, with their daughter's consent, to adopt their grandchild.

The young mother may apply for financial assistance under the Welfare and Assistance Act. If she earns more than $10 a week the amount is subject to a means test and adjusted accordingly.

If she earns $10 or less the means test does not apply.

To receive this monetary assistance she should have made some attempt to obtain maintenance from the father of the child. She is urged to do so but if this is not practicable help may still be given. She may ask him to agree to pay maintenance or can ask for an order to be made against him in the Married Persons' and Children's Summary Relief Court.

A maintenance order is made against the father until the child is 16.

THE ILLEGITIMATE FATHER

The father of an illegitimate child should not be assumed to be a villain. There are occasions when the girl is actually the seducer. There are times when he believes she has a contraceptive device or is on the Pill. Often they have had sexual relations without any thought of possible pregnancy.

Many young people believe that premarital intercourse, or rather nonmarital intercourse, is psychologically desirable.

He may be a student too or otherwise too young to undertake the responsibilities of married life.

He may want to marry her, but not yet.

He may want to marry eventually, but not her.

His parents may have refused their consent.

"Shotgun" weddings have in many cases proved to be no solution when merely entered into "to give the baby a name". Modern wisdom is against that type of marriage.

But the father of an illegitimate child, whether his paternity is admitted or legally established, is responsible for payment of maintenance until the child is 16 years of age.

A maintenance order is made against him. In cases where the young man is able to undertake only small payments, the Child Welfare Department makes up the balance. If he stops paying his share the Child

THE BABY'S GUARDIAN

As guardian of her baby, the mother must, of her own free will, sign the consent form, but not before the eighth day after her confinement, unless certified as fit to do so by a doctor or certified midwife.

Of her own choice, she may not have seen the baby at all.

She may have left the baby in the hospital and have returned home to her parents. But she is still guardian of, and responsible for the child until she has signed the consent form.

At that stage, the Director of Child Welfare becomes the legal guardian of the baby, to the exclusion of all other persons until the adoption goes through.

There is however a cooling off period. Once the mother of the baby has signed the consent form she is allowed to revoke it within the next 30 days. But not after that period.

Then the child has gone out of her life altogether. She does not know who the adopting parents are or do they know who she is. She can be assured that the Child Welfare Department have done all in their power to fit the child with parents who match as near as possible.

Welfare Department can pay it and chase him up.

This is a long-lasting responsibility. But all fathers of such children are not essentially either callous or anxious to run away.

Sometimes a father who is unable for some reason to marry the mother, who has decided to keep her child, visits the child and takes a father's pride and interest.

If the mother of the baby wants to have the child registered under the father's name and names the father in the form, his consent must be obtained.

Usually if she intends to continue association with the father, if he is interested and they intend keeping the child, the child may be registered in his name.

If he has admitted paternity and a maintenance order is made against him and he agrees to the adoption of the child he can sign the adoption consent form at the same time. This is not legally necessary, but preferable.

MONEY MATTERS

Finance is one of the biggest influences on the decision to have a child adopted.

There are the hospital costs. If she is a member of a hospital benefit fund she is mostly covered for her own hospital costs.

If she is over 16 she can in her own right transfer her individual membership to a family membership—that is a family of her and her baby.

There is good sense in this.

After the birth, while the mother is in hospital with her baby government hospitals do not make a separate charge for the baby.

But the stay in hospital for a confinement is not long nowadays, may be two or three days. If the mother is fit and wants to have the child adopted it is better for her to go home.

Being with ordinary married women at feeding time for instance may be an upsetting experience.

But when the mother is discharged from hospital the child must remain in the hospital and the hospital begins to charge a boarding fee. In the case of a government hospital this is $5 a day in some, $6 in others, and it is usually more in private hospitals.

If the baby is not sick and not listed as a patient Hospital Benefits will not pay in respect of boarding fee.

If the child is ill and registered as a patient and the charge is about $20 a day and the mother has hospital benefit as a family unit, she can obtain hospital benefits.

In cases of hardship some hospitals charge special rates.

Though the baby is still in hospital and the mother not see it again, she is still its legal guardian until she has signed the consent form (not before eight days after birth) and so has handed the child over to the Child Welfare Department.

AREAS OF RESPONSIBILITY

Then the Director of Child Welfare becomes the legal guardian of that child to the exclusion of all other persons until the adoption goes through.

When the adoption is completed through the Supreme Court the adopting parents become the legal guardians of the child.

That the mother still remains the "natural mother" is only a legal definition. She cannot have her child back. She has no right to have him back.

So at this stage there are three sets of people involved in the baby—

- the natural mother,
- the Director who is the legal guardian, and
- the adopting parents.

Once the department have offered the baby to the adopting parents they have said they will take the child, though not legally yet their own, they assume responsibility for the child.

THE HANDICAPPED CHILD

The Child Welfare Department will not make a child available for adoption if he has severe handicaps.

Then the department can request the Minister for Child Welfare to commit the child to the care of the department.

If the mother when discharged from hospital just abandons such a child, the department goes to the Children's Court and an application is made to declare the child to be destitute and the parent may be required to agree to contribute to the child's maintenance.

"such a child" being handicapped

There are three alternatives when the mother has signed the adoption consent:

(1) straight-out adoption.
(2) child definitely unsuitable for adoption, so fostered.
(3) child may be later suitable, so is fostered with a view to adoption.

There is no pressure on fosterers to adopt the child in the second case. But often affection for the fostered child and conviction that the foster parents are the solution to his problem exerts a pressure of its own. He has become their child in their own eyes.

In the third case the fostering parents take the child on the understanding that the child will be available for adoption eventually when the legal or medical problems are solved.

What happens to the child when the natural mother has signed the adoption consent form and given up the child, should the child not be adopted?

This question does not arise at the present time. If the child has problems, they are known before his placement. The child is committed to the department's care and fostered. Children who are available for adoption are always adopted.

TWO KINDS OF ADOPTION

Adoption may be arranged in two ways, privately or through the department.

Private adoptions may be arranged primarily through a lawyer, through a doctor, or through the hospital.

But since the 1970 amendment to the Adoptions Act, the Child Welfare Department must be involved in these particulars:

the Child Welfare Department must approve the adopting parents after departmental assessment;
then a signed form must be obtained from the Department consenting to the baby being handed over to the adopting parents.

If the baby is handed over without this document the person who hands over the baby is liable to a substantial penalty.

(2) When the Child Welfare Department handles the adoption, they have a list of applicants who have already been assessed, as to suitability and home conditions awaiting suitable babies.

A choice is made with great care and the Department then arranges the adoption.

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GLOSSARY

Term	Definition
ABS	Australian Bureau of Statistics
Adoption Act	*Adoption Act 1994* (WA)
Adoption of Children Act	*Adoption of Children Act 1896* (WA)
Alexandra Home	a maternity home, primarily for unmarried mothers **Also Known as:** Alexandra Home for Unmarried Mothers Alexandra Home for Women Alexandra Home for Mothers and Babies and Mothercraft Training School (Later became Ngala Mothercraft Home and Training Centre Inc.) **Location:** 55 Lincoln Street, Highgate (1916–1950) Corner of George Street and Jarrah Road, Kensington (1959–1989)
APS	Australian Psychological Society
ARCS	Adoption Research and Counselling Service
ARMS	Association Representing Mothers Separated by adoption WA
BDM	The Registry of Births, Deaths and Marriages WA
Catherine McAuley Centre	home for children 16 years and under, operated by Sisters of Mercy on the site of the former St Joseph's Orphanage and St Vincent's Foundling Home **Also known as:** Catherine McAuley Centre (1969–1989) Catherine McAuley Family Centre (1989–1997) Mercy Community Services (Inc) (1997–1999) MercyCare (1999–present) **Location:** Barrett Street, Wembley
CDW/DCW	Child Welfare Department (1927–1972) and Department for Community Welfare (1972–1985)
CEO	Chief Executive Officer
COAPC	Committee on Adoption and Permanent Care (NSW)

Term	Definition
Cth	Commonwealth
Department	the WA government department now known as the Department of Communities
DES	diethylstilboestrol – a synthetic hormone that was administered to prevent miscarriage and as a lactation suppressant
EDC	estimated date of confinement for birth of child
FASS	Forced Adoption Support Service
FOI Act	*Freedom of Information Act 1992* (WA)
Hillcrest	a maternity home operated by the Salvation Army (1922–1974) **Also known as:** Hillcrest Maternity Home Hillcrest Maternity Hospital Hillcrest Midwifery Hospital and Toddlers Home Maternity Home, North Fremantle Salvation Army Maternity Home, North Fremantle Hillcrest Maternity Hospital and Hostel for Unmarried Mothers **Locations:** 1922–1940: 23 Harvest Road, North Fremantle 1940–1945: Corner of King's Park Road and Ventnor Avenue, West Perth 1945–1974: 23 Harvest Road, North Fremantle
IBC	integrated birth certificate
ISMAPNG	Institute of Sisters of Mercy Australia and Papua New Guinea
Jigsaw	Adoption Jigsaw WA
KEMH	King Edward Memorial Hospital 374 Bagot Road, Subiaco (1916–present)
Kensington Annexe	Annexe of King Edward Memorial Hospital 91 Hensman Road, Subiaco (from 1958)
KSGAC	Kimberley Stolen Generations Aboriginal Corporation

Term	Definition
Ngala	Ngala Mothercraft Home and Training Centre (1956–1989) was the successor to the Alexandra Home for Mothers and Babies **Also known as:** Ngala Family Resource Centre (from 1989) **Location:** 55 Lincoln Street, Highgate (1956–1959) George Street, Kensington (1959–present)
NMHS	North Metropolitan Health Service
PTSD	post-traumatic stress disorder
Public Health Department	now Department of Health
RANZCP WA	WA Branch of the Royal Australian and New Zealand College of Psychiatrists
Registrar General	now Registrar of Births Deaths and Marriages
RAWA	Relationships Australia WA
St Anne's	a maternity home/hospital operated by the Sisters of Mercy **Also known as:** St Anne's Nursing Home, Mount Lawley (1937–1958) St Anne's Maternity Home, Mount Lawley (1958–1982) St Anne's Mercy Hospital, Mount Lawley (1982–1997) Mercy Hospital, Mount Lawley (1997–2014) St John of God Hospital, Mount Lawley (2014 – present) **Location:** Thirlmere Road, Mount Lawley
St Gerard's	Saint Gerard's Maternity Hospital, operated by the Sisters of Mercy **Location:** Barrett Street, Wembley
St Joseph's	Saint Joseph's Girls' Orphanage (1901–1972), operated by the Sisters of Mercy, became the Catherine McAuley Centre from 1969 **Location:** Barrett Street, Wembley

Term	Definition
St Margaret's	an extension of St Vincent's Foundling centre, operated by the Sisters of Mercy (1918–1971) later became the Catherine McAuley Centre **Also known as:** St Margaret's Hospital St Margaret's Hostel St Margaret's Home for Pregnant Girls **Location:** Barrett Street, Wembley
St Vincent's	Saint Vincent's Foundling Home, operated by the Sisters of Mercy (1914–1971) later became the Catherine McAuley Centre **Location:** Barrett Street, Wembley
Senate report	Community Affairs References Committee, *Commonwealth contribution to former forced adoption policies and practices*, Parliament of Australia, The Senate, 29 February 2012
STARTTS	Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (NSW)
WA Government	Government of Western Australia
Western Australian Year Books	a contemporary reference book. Older versions were named Year Book Western Australia and Statistical Register of Western Australia
Yorgum/ Yorgum Link-Up	Yorgum Healing Services Aboriginal Corporation, which runs the Link-Up program

Standing Committee on Environment and Public Affairs

Date first appointed:

23 May 2017

Terms of Reference:

The following is an extract from Schedule 1 of the Legislative Council Standing Orders:

'2. Environment and Public Affairs Committee

2.1 An *Environment and Public Affairs Committee* is established.

2.2 The Committee consists of 5 Members.

2.3 The functions of the Committee are to inquire into and report on –

(a) any public or private policy, practice, scheme, arrangement, or project whose implementation, or intended implementation, within the limits of the State is affecting, or may affect, the environment;

(b) any Bill referred by the Council; and

(c) petitions.

2.4 The Committee, where relevant and appropriate, is to assess the merit of matters or issues arising from an inquiry in accordance with the principles of ecologically sustainable development and the minimisation of harm to the environment.

2.5 The Committee may refer a petition to another Committee where the subject matter of the petition is within the competence of that Committee.

2.6 In this order "environment" has the meaning assigned to it under section 3 (1) and (2) of the *Environmental Protection Act 1986*.'

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